

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

New York State Democratic Committee

ADDRESS (number and street)

60 Madison Avenue, Suite 1201

☐Check if different  
than previously  
reported. (ACC)

New York

NY

10010

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00143230

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

19

2006

through

11

27

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

David Alpert

Signature of Treasurer

Electronically Filed by David Alpert

Date

03

05

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
New York State Democratic Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	9	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	7	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		179858.44
(b) Cash on Hand at Beginning of Reporting Period .....	611485.51	
(c) Total Receipts (from Line 19) .....	1090813.80	3045853.96
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1702299.31	3225712.40
7. Total Disbursements (from Line 31) .....	1289971.16	2813384.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	412328.15	412328.15
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	43687.05	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

New York State Democratic Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	9	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	7	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	159875.00	433350.00
(i) Itemized (use Schedule A) .....	415.00	9205.00
(ii) Unitemized .....	160290.00	442555.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	28750.00	133000.00
(c) Other Political Committees (such as PACs) .....	189040.00	575555.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	477341.34	1073761.60
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	1135.24	1169.27
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	234002.70	718166.43
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	189294.52	677201.66
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	189294.52	677201.66
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1090813.80	3045853.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	901519.28	2368652.30

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	57528.91	260260.33
(i) Federal Share.....		
(ii) Non-Federal Share.....	209991.38	840025.01
(b) Other Federal Operating Expenditures.....	500.00	71336.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	268020.29	1171621.60
22. Transfers to Affiliated/Other Party Committees.....	50000.00	57293.65
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	15000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	175587.99	195345.31
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	17375.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	22375.00
29. Other Disbursements.....	1000.00	1150.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	785362.88	1350598.69
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	785362.88	1350598.69
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1289971.16	2813384.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	1079979.78	1973359.24

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	189040.00	575555.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	22375.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	189040.00	553180.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	58028.91	331596.59
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1135.24	1169.27
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	56893.67	330427.32

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Henry T. Berger  
Mailing Address 127 West 77th Street

City State Zip Code  
New York NY 10024-6901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

Transaction ID: C492266

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Bernard Bergreen  
Mailing Address 1060 5th Ave

City State Zip Code  
New York NY 10128-0104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gillman Foundation

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 6

Transaction ID: C492175

Amount of Each Receipt this Period

10000.00

**C.** Full Name (Last, First, Middle Initial)  
Cara A. Bissell  
Mailing Address 3561 9th Street

City State Zip Code  
Long Island City NY 11106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYC DOE

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 0 6

Transaction ID: C492277

Amount of Each Receipt this Period

3000.00

**SUBTOTAL** of Receipts This Page (optional) .....

13500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial)

Simeon Bruner

Mailing Address 165 Brattle St.

City State Zip Code  
 Cambridge MA 02138

FEC ID number of contributing federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

Transaction ID: C492208

Amount of Each Receipt this Period

10000.00

B. Full Name (Last, First, Middle Initial)

Thomas Christofferson

Mailing Address 5 Hampshire Circle

City State Zip Code  
 Bronxville NY 10708

FEC ID number of contributing federal political committee.

C

Name of Employer  
JP Morgan Chase BankOccupation  
Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 0 1 / 2 0 0 6

Transaction ID: C492278

Amount of Each Receipt this Period

2000.00

C. Full Name (Last, First, Middle Initial)

Kevin P. Downes

Mailing Address 270 First Avenue, Apt. 5E

City State Zip Code  
 New York NY 10009-2622

FEC ID number of contributing federal political committee.

C

Name of Employer  
McGuire Woods LLPOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 0 3 / 2 0 0 6

Transaction ID: C492267

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

12250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 585

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Gregory Ehrlich  
Mailing Address 108 East 66th Street

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Agency Group

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 6

Transaction ID: C492167

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Linda Fairstein  
Mailing Address 211 East 70th Street, Apt. 25A

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 6

Transaction ID: C492292

Amount of Each Receipt this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
Ivan Foley, Jr.  
Mailing Address P.O. Box 309

City State Zip Code  
Dixon NM 87527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New Haven Research

Occupation  
Legal Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 7 / 2 0 0 6

Transaction ID: C492293

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 585

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) David H. Gikow Mailing Address 450 West End Avenue, Apt. 12B City New York State NY Zip Code 10024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt MM / DD / YYYY 11 / 03 / 2006 <b>Transaction ID: C492305</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Stefania Girombelli Mailing Address 500 East 77th Street City New York State NY Zip Code 10162 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cipriani Occupation Development Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00			Date of Receipt MM / DD / YYYY 11 / 01 / 2006 <b>Transaction ID: C492279</b> Amount of Each Receipt this Period 10000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Melvin Gitler Mailing Address 600 Plaza Drive City Secaucus State NJ Zip Code 07094 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Herbert's Occupation Business Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00			Date of Receipt MM / DD / YYYY 10 / 23 / 2006 <b>Transaction ID: C492168</b> Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

15500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)

Melvin Gitler

Mailing Address 600 Plaza Drive

City State Zip Code  
 Secaucus NJ 07094

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Herbert's

Occupation  
Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 0 7 / 2 0 0 6

Transaction ID: C492294

Amount of Each Receipt this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)

J. Michael Goodson

Mailing Address 92 Rolling Hill Rd.

City State Zip Code  
 Skillman NJ 08558

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Crest Group

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 2 4 / 2 0 0 6

Transaction ID: C492315

Amount of Each Receipt this Period

10000.00

**C.** Full Name (Last, First, Middle Initial)

Robert Gordon

Mailing Address 270 Fifth Avenue

City State Zip Code  
 New York NY 10001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 0 3 / 2 0 0 6

Transaction ID: C492307

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional) .....

15125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Laurence Greenwald		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 115 Central Park West, Apt. 6B		<b>Transaction ID:</b> C492207
City State Zip Code New York NY 10023	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer troock And Stroock And La- van	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Jay Halfon		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 215 W 88th Street, Apt. 5E		<b>Transaction ID:</b> C492295
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Debra Hauser		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 234 Church Street		<b>Transaction ID:</b> C492300
City State Zip Code New Haven CT 06510	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Clinical Psychiatrist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)

Jay Jacobs

Mailing Address 12 Cypress Dr

City State Zip Code  
 Woodbury NY 11797-1502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Timberlake Management Cor-  
p.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 0 7 / 2 0 0 6

Transaction ID: C492296

Amount of Each Receipt this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)

Walter Kaye

Mailing Address 475 Park Avenue

City State Zip Code  
 New York NY 10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

Transaction ID: C492317

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)

Patricia A. Kenner

Mailing Address 720 Park Ave

City State Zip Code  
 New York NY 10021-4954

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Campus Coach Lines

Occupation  
Executive VP / CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 2 4 / 2 0 0 6

Transaction ID: C492316

Amount of Each Receipt this Period

10000.00

**SUBTOTAL** of Receipts This Page (optional) .....

20000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 585

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Derek Kirkland Mailing Address 120 East End Avenue, Apt. 14A City New York State NY Zip Code 10028 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Morgan Stanley Occupation Investment Banker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6 <b>Transaction ID: C492205</b> Amount of Each Receipt this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) David Kogelman Mailing Address 294 Riverside Dr City New York State NY Zip Code 10025-5284 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 <b>Transaction ID: C492284</b> Amount of Each Receipt this Period 125.00
<b>C.</b> Full Name (Last, First, Middle Initial) LEONARD KOHEN Mailing Address 67 E 11TH ST., #703 City NEW YORK State NY Zip Code 10003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer WAXMAN Occupation LAWYER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 <b>Transaction ID: C492287</b> Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional) .....

5250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 585

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Bruce G. Krasting

Mailing Address 17 Apple Bee Farm Road

City State Zip Code  
Croton On Hudson NY 10520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	6

Transaction ID: C492225

Amount of Each Receipt this Period

3000.00

**B.** Full Name (Last, First, Middle Initial)  
William L. Mack

Mailing Address 760 Park Avenue

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mack Co.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	0	6

Transaction ID: C492313

Amount of Each Receipt this Period

10000.00

**C.** Full Name (Last, First, Middle Initial)  
Brant K. Maller

Mailing Address 7 Winged Foot Drive

City State Zip Code  
Larchmont NY 10538

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pillsbury Winthrop Shaw  
Pittman LL

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	6

Transaction ID: C492173

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

13500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 585

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)

Michael Manoussos

Mailing Address 7 12th Avenue

City	State	Zip Code
Mineola	NY	11501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Manoussos & Associates PCOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	7	/	2	0	0	6

Transaction ID: C492297

Amount of Each Receipt this Period

10000.00

**B.** Full Name (Last, First, Middle Initial)

Robinson Markel

Mailing Address 38 East 85th Street

City	State	Zip Code
New York	NY	10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Katten Muchin Rosenman LLPOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	6

Transaction ID: C492169

Amount of Each Receipt this Period

10000.00

**C.** Full Name (Last, First, Middle Initial)

Va Maughan

Mailing Address 730 Park Avenue

City	State	Zip Code
New York	NY	10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	6

Transaction ID: C492171

Amount of Each Receipt this Period

10000.00

**SUBTOTAL** of Receipts This Page (optional) .....

30000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Constance J. Milstein  
Mailing Address 390 Park Avenue, Suite 600

City State Zip Code  
New York NY 10022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Milstein Properties

Occupation  
Real Estate Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 6

Transaction ID: C492213

Amount of Each Receipt this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
Matthew E. Morningstar  
Mailing Address 303 Park Avenue South, Apt. 405

City State Zip Code  
New York NY 10010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Morgan Stanley

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

Transaction ID: C492285

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
John Nonna  
Mailing Address 21 Ashland Avenue

City State Zip Code  
Pleasantville NY 10570

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LeBoeuf Lamb Greene & Mac-  
Rae

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

Transaction ID: C492273

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

3250.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)

John Park

Mailing Address 73-19 Roosevelt Avenue

City

Jackson Heights

State

NY

Zip Code

11372

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Well Communications

Occupation

Executive

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 7 / 2 0 0 6

Transaction ID: C492301

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Sarah L. Reid

Mailing Address 450 West End Avenue, Apt. 12B

City

New York

State

NY

Zip Code

10024-5342

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kelley Drye & Warren LLP

Occupation

Attorney

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

Transaction ID: C492268

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Jodi Schwartz

Mailing Address 51 W 52nd St

City

New York

State

NY

Zip Code

10019-6119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wachtell, Lipton

Occupation

Attorney

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 6

Transaction ID: C492177

Amount of Each Receipt this Period

10000.00

**SUBTOTAL** of Receipts This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Jayne Sherman  
Mailing Address 4 East 14th Street

City State Zip Code  
New York NY 10003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

Transaction ID: C492280

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Marion S. Sinek  
Mailing Address 25 Kerry Lane

City State Zip Code  
Chappaqua NY 10514-1606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 6

Transaction ID: C492166

Amount of Each Receipt this Period

125.00

**C.** Full Name (Last, First, Middle Initial)  
Catherine Steck  
Mailing Address 329 W 87th St

City State Zip Code  
New York NY 10024-2602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 7 / 2 0 0 6

Transaction ID: C492298

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2875.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lillian Vernon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 955 5th Avenue, 15th Floor		<b>Transaction ID:</b> C492172
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Lillian Vernon Company	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) David W. Wang, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 59-73 59th Place		<b>Transaction ID:</b> C492282
City Maspeth	State NY	Zip Code 11378
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Paul Weiss Rifkind Wharton & Garri	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Cindy Warner		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 303 W. 66th Street, Apt. 12CE		<b>Transaction ID:</b> C492308
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Unilever	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

**SUBTOTAL** of Receipts This Page (optional) .....

5625.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Will K Weinstein

Mailing Address One Ferry Building, Suite 255

City State Zip Code  
 San Francisco CA 94111

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 0 6 / 2 0 0 6

Transaction ID: C492290

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Capitol Group, LLC

Mailing Address 29 Elk St.

City State Zip Code  
 Albany NY 12207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

Transaction ID: C492214

Amount of Each Receipt this Period

1000.00

LLC permissible funds see  
below if itemized

Full Name (Last, First, Middle Initial)

**C.** Nick Barrella

Mailing Address 29 Elk Street

City State Zip Code  
 Albany NY 12207-1002

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Capitol Group, LLC

Occupation  
Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

Transaction ID: C492310

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

A. Timothy P. Sheridan

Mailing Address 29 Elk Street, Suite 100

City State Zip Code  
 Albany NY 12207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capitol Group, LLC

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

Transaction ID: C492311

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Kramer, Dillof, Livingston & Moore

Mailing Address 217 Broadway

City State Zip Code  
 New York NY 10007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 0 9 / 2 0 0 6

Transaction ID: C492299

Amount of Each Receipt this Period

2000.00

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

C. Judith A. Livingston

Mailing Address Counselors at Law  
217 Broadway

City State Zip Code  
 New York NY 10007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kramer, Dillof, Livingston  
& Moore

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 0 9 / 2 0 0 6

Transaction ID: C492367

Amount of Each Receipt this Period

580.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 585

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

A. Thomas A. Moore

Mailing Address 1133 5th Ave

City State Zip Code  
 New York NY 10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kramer, Dillof, Livingston  
& Moore

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 0 9 / 2 0 0 6

Transaction ID: C492366

Amount of Each Receipt this Period

1200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. McCarthy Fingar LLP

Mailing Address 11 Martine Ave

City State Zip Code  
 White Plains NY 10606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 0 3 / 2 0 0 6

Transaction ID: C492272

Amount of Each Receipt this Period

500.00

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

C. FRANK STRENG

Mailing Address 11 MARTINE AVE

City State Zip Code  
 WHITE PLAINS NY 10606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MCCARTHY FINGAR LLP

Occupation  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 0 3 / 2 0 0 6

Transaction ID: C492306

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) .....

500.00

TOTAL This Period (last page this line number only) .....

159875.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 585

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) CAP PAC Mailing Address 38 IVY ST SE City WASHINGTON State DC Zip Code 20003 FEC ID number of contributing federal political committee. <b>C</b> C00388959 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6 <b>Transaction ID:</b> C492179 Amount of Each Receipt this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) DISTILLED SPIRITS COUNCIL OF THE UNITED STATES INC POLITICAL ACTION COMMITTEE Mailing Address 1250 EYE ST., NW #400 City WASHINGTON State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00030734 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> C492312 Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of David Koon Mailing Address 144 Fairport Village Landing, Suit City Fairport State NY Zip Code 14450 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> C492215 Amount of Each Receipt this Period 500.00  Funds Permissible Under the Act

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 585

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Dick Gottfried		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> C492274
Mailing Address c/o Wendi Paster 70 LaSalle Street, City State Zip Code New York NY 10027-4706		<b>Amount of Each Receipt this Period</b> 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		<b>Funds Permissible Under the Act</b>
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Paul D. Tonko		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> C492309
Mailing Address 137 Princeton Street City State Zip Code Amsterdam NY 12010		<b>Amount of Each Receipt this Period</b> 250.00
FEC ID number of contributing federal political committee. <b>C</b>		<b>Funds Permissible Under the Act</b>
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of RoAnn Destito		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6 <b>Transaction ID:</b> C492181
Mailing Address 1001 Garden Road City State Zip Code Utica NY 13501		<b>Amount of Each Receipt this Period</b> 500.00
FEC ID number of contributing federal political committee. <b>C</b>		<b>Funds Permissible Under the Act</b>
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 585

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
HSBC NORTH AMERICA POLITICAL ACTION COMMITTEE (H-PAC)

Mailing Address 2700 Sanders Road

City	State	Zip Code
Prospect Heights	IL	60070

FEC ID number of contributing  
federal political committee. **C** C00033423

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 0	/	3 0	/	2 0 0 6

Transaction ID: C492210

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)

IMPACT

Mailing Address 509 Madison Ave.  
Suite 1902

City	State	Zip Code
New York	NY	10022

FEC ID number of contributing  
federal political committee. **C** C00348607

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 0	/	3 1	/	2 0 0 6

Transaction ID: C492224

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
INTL. UNION OF BRICKLAYERS & ALLIED CRAFTWORKERS PAC

Mailing Address 1776 Eye St. NW

City	State	Zip Code
Washington	DC	20006

FEC ID number of contributing  
federal political committee. **C** C00003632

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 0	/	3 1	/	2 0 0 6

Transaction ID: C492221

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

11000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 585

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE

Mailing Address 1750 New York Avenue NW

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00007542

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

Transaction ID: C492204

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.** The National Leadership PAC

Mailing Address P.O. Box 5577  
 Manhattanville Station

City State Zip Code  
 New York NY 10027

FEC ID number of contributing  
federal political committee.

**C** C00302588

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

Transaction ID: C492216

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

28750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 585

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)  
**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 South Capitol Street SE  
 2nd Floor

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 1 9 / 2 0 0 6

Transaction ID: C492245

Amount of Each Receipt this Period

60000.00

Full Name (Last, First, Middle Initial)  
**B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 South Capitol Street SE  
 2nd Floor

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 2 3 / 2 0 0 6

Transaction ID: C492246

Amount of Each Receipt this Period

25000.00

Full Name (Last, First, Middle Initial)  
**C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 South Capitol Street SE  
 2nd Floor

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

Transaction ID: C492247

Amount of Each Receipt this Period

78000.00

**SUBTOTAL** of Receipts This Page (optional) .....

163000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 585

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)  
**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 South Capitol Street SE  
 2nd Floor

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 6

Transaction ID: C492248

Amount of Each Receipt this Period

32000.00

Full Name (Last, First, Middle Initial)  
**B. Democratic National Committee**

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436994.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 2 4 / 2 0 0 6

Transaction ID: C492314

Amount of Each Receipt this Period

140000.00

Full Name (Last, First, Middle Initial)  
**C. Democratic National Committee**

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436994.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

Transaction ID: C492201

Amount of Each Receipt this Period

50000.00

**SUBTOTAL** of Receipts This Page (optional) .....

222000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 585

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436994.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

Transaction ID: C492200

Amount of Each Receipt this Period

50000.00

**B.** Full Name (Last, First, Middle Initial)  
DNC State Party Victory Fund

Mailing Address 430 South Capitol Street, S.E.

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

118984.79

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 2 4 / 2 0 0 6

Transaction ID: C492178

Amount of Each Receipt this Period

12341.34

**C.** Full Name (Last, First, Middle Initial)  
Dollars For Democrats

Mailing Address 50 E Street, S.E.,  
Suite 300

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee. **C**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 0 2 / 2 0 0 6

Transaction ID: C492244

Amount of Each Receipt this Period

30000.00

**SUBTOTAL** of Receipts This Page (optional) .....

92341.34

**TOTAL** This Period (last page this line number only) .....

477341.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 585

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial)

Critical Mention, Inc.

Mailing Address 1776 Broadway,  
24th Floor

City State Zip Code  
New York NY 10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

857.14

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 0 6

Transaction ID: C492302

Amount of Each Receipt this Period

857.14

Vendor Credit--Press Clip-  
pings

B. Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City State Zip Code  
Piscataway NJ 08854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.13

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 6

Transaction ID: C492364

Amount of Each Receipt this Period

139.05

C. Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City State Zip Code  
Piscataway NJ 08854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.13

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 6

Transaction ID: C492365

Amount of Each Receipt this Period

139.05

SUBTOTAL of Receipts This Page (optional) .....

1135.24

TOTAL This Period (last page this line number only) .....

1135.24

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 585

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial)  
Committee To Elect Gary L. Ackerman, Inc.

Mailing Address P.O. Box 95

City State Zip Code  
Fresh Meadows NY 11365

FEC ID number of contributing  
federal political committee.

C C00165241

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	6

Transaction ID: C492202

Amount of Each Receipt this Period

5000.00

Transfer

B. Full Name (Last, First, Middle Initial)  
FRIENDS OF HILLARY

Mailing Address 1717 K STREET NW SUITE 309A

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

C C00358895

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	6

Transaction ID: C492203

Amount of Each Receipt this Period

150000.00

Transfer

C. Full Name (Last, First, Middle Initial)  
FRIENDS OF MAURICE HINCHEY

Mailing Address PO Box 4497

City State Zip Code  
Kingston NY 12402

FEC ID number of contributing  
federal political committee.

C C00272633

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	6

Transaction ID: C492223

Amount of Each Receipt this Period

5000.00

Transfer

SUBTOTAL of Receipts This Page (optional) .....

160000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 585

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
GILLIBRAND FOR CONGRESS

Mailing Address 514 Warren Street

City	State	Zip Code
Hudson	NY	12534

FEC ID number of contributing  
federal political committee.**C** C00413914

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	6

Transaction ID: C492249

Amount of Each Receipt this Period

23500.00

Transfer

**B.** Full Name (Last, First, Middle Initial)  
GILLIBRAND FOR CONGRESS

Mailing Address 514 Warren Street

City	State	Zip Code
Hudson	NY	12534

FEC ID number of contributing  
federal political committee.**C** C00413914

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	6

Transaction ID: C492243

Amount of Each Receipt this Period

11500.00

Transfer

**C.** Full Name (Last, First, Middle Initial)  
Higgins for Congress

Mailing Address P.O. Box 28

City	State	Zip Code
Buffalo	NY	14220

FEC ID number of contributing  
federal political committee.**C** C00401034

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	6

Transaction ID: C492209

Amount of Each Receipt this Period

2000.00

Transfer

SUBTOTAL of Receipts This Page (optional) .....

37000.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 585

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)

MALONEY FOR CONGRESS

Mailing Address 24 EAST 93RD STREET

City State Zip Code  
 NEW YORK NY 10128

FEC ID number of contributing  
federal political committee.

**C** C00273169

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 0 3 / 2 0 0 6

Transaction ID: C492275

Amount of Each Receipt this Period

2000.00

Transfer

**B.**

Full Name (Last, First, Middle Initial)

NITA LOWEY FOR CONGRESS

Mailing Address PO Box 271

City State Zip Code  
 White Plains NY 10605

FEC ID number of contributing  
federal political committee.

**C** C00219881

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 6

Transaction ID: C492318

Amount of Each Receipt this Period

10000.00

Transfer

**C.**

Full Name (Last, First, Middle Initial)

RANGEL FOR CONGRESS

Mailing Address PO BOX 5577  
 MANHATTANVILLE STATION

City State Zip Code  
 NEW YORK NY 10027

FEC ID number of contributing  
federal political committee.

**C** C00302422

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

Transaction ID: C492217

Amount of Each Receipt this Period

20000.00

Transfer

**SUBTOTAL** of Receipts This Page (optional) .....

32000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 585

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial)  
SERRANO FOR CONGRESS

Mailing Address 275 MADISON AVENUE

City State Zip Code  
NEW YORK NY 10016

FEC ID number of contributing  
federal political committee.

C C00240986

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 6

Transaction ID: C492211

Amount of Each Receipt this Period

5000.00

Transfer

SUBTOTAL of Receipts This Page (optional) .....

5000.00

TOTAL This Period (last page this line number only) .....

234000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 / 585

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

A. Billionaires Inc.

Mailing Address 161 Prospect Park West, #3R

City  
BrooklynState  
NYZip Code  
11215Purpose of Disbursement  
Scholarship/Non-Profit Performance Fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8256

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	6

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

500.00

TOTAL This Period (last page this line number only) .....

500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 585

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 South Capitol Street SE  
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Party Transfer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9056

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

50000.00

**TOTAL** This Period (last page this line number only) .....

50000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. JOHN HALL FOR CONGRESS**

Mailing Address PO Box 377

City  
Dover Plains

State  
NY

Zip Code  
12522

Purpose of Disbursement  
2006 NY-H-19-General

Candidate Name  
John Hall

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 19

Transaction ID: D8939

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. MEJIAS FOR CONGRESS**

Mailing Address 400 Post Avenue, Suite 404

City  
Westbury

State  
NY

Zip Code  
11590

Purpose of Disbursement  
2006 NY-H-03-General

Candidate Name  
Dave Mejias

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 03

Transaction ID: D8917

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

10000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Citizens for Greater Syracuse

Mailing Address 6075 Molloy Rd.

City  
SyracuseState  
NYZip Code  
13212Purpose of Disbursement  
Contribution

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: D8393

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	0	6

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

1000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Gabriel Acevedo**

Mailing Address 550 W 172nd St  
Apt. 4E

City New York State NY Zip Code 10032-2017

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8421**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Katherine Acevedo**

Mailing Address 2498 Devoe Terrace  
FL 1

City Bronx State NY Zip Code 10468-4905

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9139**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**C. Katherine Acevedo**

Mailing Address 2498 Devoe Terrace  
FL 1

City Bronx State NY Zip Code 10468-4905

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8418**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

**SUBTOTAL** of Disbursements This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Marlon Acevedo

Mailing Address 281 Wadsworth Ave  
APT 2E

City NEW YORK State NY Zip Code 10040-4412

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9129

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Marlon Acevedo

Mailing Address 281 Wadsworth Ave  
APT 2E

City NEW YORK State NY Zip Code 10040-4412

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8408

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**C.** Moises Acevedo

Mailing Address 550 W 172nd St  
Apt. 4E

City New York State NY Zip Code 10032-2017

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8419

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Carine Adams

Mailing Address 1973 Emerson Rd.

City Port Byron State NY Zip Code 13140

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9472

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**B.** Carine Adams

Mailing Address 1973 Emerson Rd.

City Port Byron State NY Zip Code 13140

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9571

Date of Disbursement

/   /

Amount of Each Disbursement this Period

132.37

Full Name (Last, First, Middle Initial)

**C.** Aetna

Mailing Address P.O. Box 7247-0233

City Philadelphia State PA Zip Code 19170-0233

Purpose of Disbursement  
Health Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8906

Date of Disbursement

/   /

Amount of Each Disbursement this Period

434.40

**SUBTOTAL** of Disbursements This Page (optional) .....

632.90

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Bram Alden

Mailing Address 1080 Fifth Avenue, Apt. 13B

City State Zip Code  
New York NY 10012

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9572**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

328.40

Full Name (Last, First, Middle Initial)

**B.** Amanda Alexander

Mailing Address 50 Mabbett Street

City State Zip Code  
Mechanicville NY 12118

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9263**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**C.** Amanda Alexander

Mailing Address 50 Mabbett Street

City State Zip Code  
Mechanicville NY 12118

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9574**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

132.38

**SUBTOTAL** of Disbursements This Page (optional) .....

526.91

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Francisco Alfoncesca

Mailing Address 170 W 85th St  
# 4E

City New York State NY Zip Code 10024-4422

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8423**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Charles Allen

Mailing Address 2465 Dublin Rd.

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9790**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.03

Full Name (Last, First, Middle Initial)

**C.** Charles Allen

Mailing Address 2465 Dublin Rd.

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9576**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

122.68

**SUBTOTAL** of Disbursements This Page (optional) .....

286.71

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Carlos Alleyne

Mailing Address 418 W 130th St  
APT 51

City New York State NY Zip Code 10027-7522

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8436

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Gloria Almanzar

Mailing Address 2201 Amsterdam Ave  
Apt. 6E

City New York State NY Zip Code 10032-2549

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8424

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Gwenth Als

Mailing Address 349 E 19th St

City Brooklyn State NY Zip Code 11226-5870

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8540

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Gladys Alvarez

Mailing Address 560 W 163rd St  
Apt. 22

City New York State NY Zip Code 10032-5809

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8429

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Jamal Anderson

Mailing Address 140 Einstein Loop  
APT 9C

City Bronx State NY Zip Code 10475-4920

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9118

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 31 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Jamal Anderson

Mailing Address 140 Einstein Loop  
APT 9C

City Bronx State NY Zip Code 10475-4920

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8396

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 07 / 2006

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 46 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Adem Arifaj

Mailing Address 20 Wood Street

City Garfield State NJ Zip Code 07026

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9265**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

717.17

Full Name (Last, First, Middle Initial)

**B.** Adem Arifaj

Mailing Address 20 Wood Street

City Garfield State NJ Zip Code 07026

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9792**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

379.29

Full Name (Last, First, Middle Initial)

**C.** Ryan Arsenault

Mailing Address 191 Mechanic Street

City Marlboro State MA Zip Code 01752

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8327**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

70.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1166.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Mary Austin

Mailing Address 16 Youngs Place

City Latham State NY Zip Code 12110

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9197

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

29.85

Full Name (Last, First, Middle Initial)

**B.** Christopher Babcock

Mailing Address 25 Plochmann Ln

City Woodstock State NY Zip Code 12498

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9267

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**C.** Christopher Babcock

Mailing Address 25 Plochmann Ln

City Woodstock State NY Zip Code 12498

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9794

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

64.76

**SUBTOTAL** of Disbursements This Page (optional) .....

160.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Emma Bachmann

Mailing Address 66 Newington Avenue

City State Zip Code  
Wilton NY 12831

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9199

Date of Disbursement

/   /

Amount of Each Disbursement this Period

164.20

Full Name (Last, First, Middle Initial)

**B.** Emma Bachmann

Mailing Address 66 Newington Avenue

City State Zip Code  
Wilton NY 12831

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9269

Date of Disbursement

/   /

Amount of Each Disbursement this Period

269.89

Full Name (Last, First, Middle Initial)

**C.** Emma Bachmann

Mailing Address 66 Newington Avenue

City State Zip Code  
Wilton NY 12831

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8993

Date of Disbursement

/   /

Amount of Each Disbursement this Period

113.40

**SUBTOTAL** of Disbursements This Page (optional) .....

547.49

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Emma Bachmann

Mailing Address 66 Newington Avenue

City State Zip Code  
Wilton NY 12831

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9020

Date of Disbursement

/   /

Amount of Each Disbursement this Period

48.13

Full Name (Last, First, Middle Initial)

**B.** Emma Bachmann

Mailing Address 66 Newington Avenue

City State Zip Code  
Wilton NY 12831

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9796

Date of Disbursement

/   /

Amount of Each Disbursement this Period

199.93

Full Name (Last, First, Middle Initial)

**C.** Emma Bachmann

Mailing Address 66 Newington Avenue

City State Zip Code  
Wilton NY 12831

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9578

Date of Disbursement

/   /

Amount of Each Disbursement this Period

106.88

**SUBTOTAL** of Disbursements This Page (optional) .....

354.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Paul Banuski

Mailing Address 43 Academy Street

City Skaneateles State NY Zip Code 13152

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9271

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

296.66

Full Name (Last, First, Middle Initial)

**B.** Paul Banuski

Mailing Address 43 Academy Street

City Skaneateles State NY Zip Code 13152

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8971

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

1.75

Full Name (Last, First, Middle Initial)

**C.** Paul Banuski

Mailing Address 43 Academy Street

City Skaneateles State NY Zip Code 13152

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9053

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

5.53

**SUBTOTAL** of Disbursements This Page (optional) .....

303.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 51 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Paul Banuski

Mailing Address 43 Academy Street

City Skaneateles State NY Zip Code 13152

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9474

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

91.85

Full Name (Last, First, Middle Initial)

**B.** Paul Banuski

Mailing Address 43 Academy Street

City Skaneateles State NY Zip Code 13152

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9845

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

160.92

Full Name (Last, First, Middle Initial)

**C.** Timothy P. Barber

Mailing Address 63 South Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9201

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

285.84

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Timothy P. Barber

Mailing Address 63 South Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9273

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

141.49

Full Name (Last, First, Middle Initial)

**B.** Timothy P. Barber

Mailing Address 63 South Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9798

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

103.32

Full Name (Last, First, Middle Initial)

**C.** Timothy P. Barber

Mailing Address 63 South Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9580

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

122.68

**SUBTOTAL** of Disbursements This Page (optional) .....

367.49

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Tiandra Bates

Mailing Address 130 Letterts Pl  
Apt #3C

City Brooklyn State NY Zip Code 11238

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D9120

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Tiandra Bates

Mailing Address 130 Letterts Pl  
Apt #3C

City Brooklyn State NY Zip Code 11238

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D8398

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

**C.** Cassandra Beal

Mailing Address 7653 Kirkville Rd.

City Kirkville State NY Zip Code 13082

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D9713

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

166.18

**SUBTOTAL** of Disbursements This Page (optional) .....

1466.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Cassandra Beal

Mailing Address 7653 Kirkville Rd.

City State Zip Code  
Kirkville NY 13082

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9275**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

275.86

Full Name (Last, First, Middle Initial)

**B.** Cassandra Beal

Mailing Address 7653 Kirkville Rd.

City State Zip Code  
Kirkville NY 13082

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9051**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

21.88

Full Name (Last, First, Middle Initial)

**C.** Cassandra Beal

Mailing Address 7653 Kirkville Rd.

City State Zip Code  
Kirkville NY 13082

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9800**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

86.95

**SUBTOTAL** of Disbursements This Page (optional) .....

384.69

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 55 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Cassandra Beal

Mailing Address 7653 Kirkville Rd.

City  
Kirkville

State  
NY

Zip Code  
13082

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9847

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

166.18

Full Name (Last, First, Middle Initial)

**B.** Timothy Beckman

Mailing Address 135 W 135th St

City  
New York

State  
NY

Zip Code  
10030-2918

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8476

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 7 / 2 0 0 6

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Jeffrey Bellamy

Mailing Address 120 Ferris Avenue

City  
Syracuse

State  
NY

Zip Code  
13224

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8268

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 0 / 2 5 / 2 0 0 6

Amount of Each Disbursement this Period

30.00

**SUBTOTAL** of Disbursements This Page (optional) .....

296.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jeffrey Bellamy

Mailing Address 120 Ferris Avenue

City Syracuse State NY Zip Code 13224

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8328

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**B.** Michael J. Bishop

Mailing Address 15 Grand Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9203

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**C.** Michael J. Bishop

Mailing Address 15 Grand Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9277

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

109.66

**SUBTOTAL** of Disbursements This Page (optional) .....

205.79

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Michael J. Bishop

Mailing Address 15 Grand Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9476

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Michael J. Bishop

Mailing Address 15 Grand Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9582

Date of Disbursement

/   /

Amount of Each Disbursement this Period

99.20

Full Name (Last, First, Middle Initial)

**C.** Fernando Bisset

Mailing Address 44 Jackson St  
APT 5D

City New York State NY Zip Code 10002-6638

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8480

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

232.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 58 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Susanna Bixby

Mailing Address Cazenovia College,  
Box 1030

City Cazenovia State NY Zip Code 13035

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8558**

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

**B.** Sheneka Blake

Mailing Address 400 Convent Ave

City New York State NY Zip Code 10031-4207

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8445**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Lillian Bland

Mailing Address 950 Gates Ave  
APT 6J

City Brooklyn State NY Zip Code 11221-3647

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8437**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

235.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Torri Blandford

Mailing Address 519 Nichols Street

City  
Utica

State  
NY

Zip Code  
13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9205

Date of Disbursement

/   /

Amount of Each Disbursement this Period

18.37

Full Name (Last, First, Middle Initial)

**B.** Stephen Blanks

Mailing Address 164 W 141st St  
APT 2M

City  
New York

State  
NY

Zip Code  
10030-1816

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8461

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Jane Blaszczyk

Mailing Address Country Club Ct A201

City  
New York Mills

State  
NY

Zip Code  
13417

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9279

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.82

**SUBTOTAL** of Disbursements This Page (optional) .....

154.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jane Blaszczyk

Mailing Address Country Club Ct A201

City State Zip Code  
 New York Mills NY 13417

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9478

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 8 / 2 0 0 6

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**B.** Erin Bock

Mailing Address 5024 Hartlin Drive

City State Zip Code  
 Bethel Park PA 15102

Purpose of Disbursement  
 Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8269

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 2 5 / 2 0 0 6

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

**C.** Erin Bock

Mailing Address 5024 Hartlin Drive

City State Zip Code  
 Bethel Park PA 15102

Purpose of Disbursement  
 Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8329

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 3 1 / 2 0 0 6

Amount of Each Disbursement this Period

110.00

**SUBTOTAL** of Disbursements This Page (optional) .....

246.13

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 61 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Erin Bock

Mailing Address 5024 Hartlin Drive

City  
Bethel Park

State  
PA

Zip Code  
15102

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8559**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**B.** Abigail Bower

Mailing Address 32 Van Patten Street

City  
Auburn

State  
NY

Zip Code  
13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9080**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

13.00

Full Name (Last, First, Middle Initial)

**C.** Abigail Bower

Mailing Address 32 Van Patten Street

City  
Auburn

State  
NY

Zip Code  
13021

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9108**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

37.50

**SUBTOTAL** of Disbursements This Page (optional) .....

80.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Martin Bower

Mailing Address 32 Van Patten Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9078**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

**B.** Martin Bower

Mailing Address 32 Van Patten Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9076**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C.** Dominique Boyd

Mailing Address 14 Butler Pl

City Brooklyn State NY Zip Code 11238-5137

Purpose of Disbursement

GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8542**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

130.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** James Bragg

Mailing Address 124 E 117th St  
APT 4J

City New York State NY Zip Code 10035-4644

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8432

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Lois Brazak

Mailing Address 9 Steel Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9284

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**C.** Andrew Brenner

Mailing Address 705 N. Yakima Avenue

City Tacoma State WA Zip Code 98403

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8270

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

80.00

**SUBTOTAL** of Disbursements This Page (optional) .....

213.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Andrew Brenner

Mailing Address 705 N. Yakima Avenue

City Tacoma State WA Zip Code 98403

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8330**

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

45.00

Full Name (Last, First, Middle Initial)

**B.** Andrew Brenner

Mailing Address 705 N. Yakima Avenue

City Tacoma State WA Zip Code 98403

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8560**

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C.** Pamela Brewer

Mailing Address 101 Meadowbrook Rd.

City Short Hills State NJ Zip Code 07078

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9207**

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

108.07

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 65 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Pamela Brewer

Mailing Address 101 Meadowbrook Rd.

City  
Short Hills

State  
NJ

Zip Code  
07078

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9731**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.03

Full Name (Last, First, Middle Initial)

**B.** Pamela Brewer

Mailing Address 101 Meadowbrook Rd.

City  
Short Hills

State  
NJ

Zip Code  
07078

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9480**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

68.94

Full Name (Last, First, Middle Initial)

**C.** Pamela Brewer

Mailing Address 101 Meadowbrook Rd.

City  
Short Hills

State  
NJ

Zip Code  
07078

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9849**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.03

**SUBTOTAL** of Disbursements This Page (optional) .....

197.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Pamela Brewer

Mailing Address 101 Meadowbrook Rd.

City  
Short Hills

State  
NJ

Zip Code  
07078

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D9084**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9.98

Full Name (Last, First, Middle Initial)

**B.** Diane Brooks

Mailing Address Ballany Tine Rd., Apt. 105-A

City  
Syracuse

State  
NY

Zip Code  
13205

Purpose of Disbursement

Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D8271**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

**C.** Diane Brooks

Mailing Address Ballany Tine Rd., Apt. 105-A

City  
Syracuse

State  
NY

Zip Code  
13205

Purpose of Disbursement

Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D8331**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

147.50

**SUBTOTAL** of Disbursements This Page (optional) .....

167.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Diane Brooks

Mailing Address Ballany Tine Rd., Apt. 105-A

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8561

Date of Disbursement

/   /

Amount of Each Disbursement this Period

122.50

Full Name (Last, First, Middle Initial)

**B.** Christopher Broughton

Mailing Address 6 Marinello Terrace

City Albany State NY Zip Code 12209

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9482

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**C.** Christopher Broughton

Mailing Address 6 Marinello Terrace

City Albany State NY Zip Code 12209

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9584

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

**SUBTOTAL** of Disbursements This Page (optional) .....

254.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Denise Brown

Mailing Address 1107 City Street, #2

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9286

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.82

Full Name (Last, First, Middle Initial)

**B.** Denise Brown

Mailing Address 1107 City Street, #2

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9484

Date of Disbursement

/   /

Amount of Each Disbursement this Period

99.20

Full Name (Last, First, Middle Initial)

**C.** Denise Brown

Mailing Address 1107 City Street, #2

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9586

Date of Disbursement

/   /

Amount of Each Disbursement this Period

132.38

**SUBTOTAL** of Disbursements This Page (optional) .....

267.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 69 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Farron Brown

Mailing Address 142 Hall Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8272**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**B.** Farron Brown

Mailing Address 142 Hall Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8332**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

47.50

Full Name (Last, First, Middle Initial)

**C.** Farron Brown

Mailing Address 142 Hall Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8562**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

297.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** James Brown

Mailing Address 25 W 130th St

City  
NEW YORK

State  
NY

Zip Code  
10037-3638

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9131

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** James Brown

Mailing Address 25 W 130th St

City  
NEW YORK

State  
NY

Zip Code  
10037-3638

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8410

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**C.** Daisy Bueno

Mailing Address Dablon Hall 422,  
1419 Saltsprings Rd.

City  
Syracuse

State  
NY

Zip Code  
13214

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8563

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1230.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 71 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Sharmaine Burke

Mailing Address 328 Flatbush Ave

City  
Brooklyn

State  
NY

Zip Code  
11238-4302

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8541**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Kevin Burt

Mailing Address 1581 Park Ave

City  
New York

State  
NY

Zip Code  
10029-1832

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8463**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Tracy Burt

Mailing Address 1581 Park Ave

City  
New York

State  
NY

Zip Code  
10029-1832

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8462**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 72 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Terri Bush

Mailing Address 166-45b 169th Street

City  
Jamaica

State  
NY

Zip Code  
11434

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8522**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Butler Associates LLC

Mailing Address 204 East 23rd Street

City  
New York

State  
NY

Zip Code  
10010

Purpose of Disbursement  
GOTV Newspaper Ad Non-Fed Portion of Exp

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8922**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2589.39

Full Name (Last, First, Middle Initial)

**C.** Ashanti Bynoe

Mailing Address 3322 Fenton Ave

City  
Bronx

State  
NY

Zip Code  
10469-2806

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9122**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3189.39

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 73 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Ashanti Bynoe

Mailing Address 3322 Fenton Ave

City State Zip Code  
Bronx NY 10469-2806

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D8400

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**B.** Lisa Campbell

Mailing Address 505 Lincoln Pl  
APT 2I

City State Zip Code  
Brooklyn NY 11238-6230

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D8438

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** CapAd Communications, Inc.

Mailing Address 5620 James Gunnell Lane

City State Zip Code  
Alexandria VA 22310

Purpose of Disbursement  
GOTV Calls-Generic

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D9901

Date of Disbursement

/   /

Amount of Each Disbursement this Period

14629.68

**SUBTOTAL** of Disbursements This Page (optional) .....

15429.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 74 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Crescencia Cardens

Mailing Address 250 Wortman Ave  
APT 4H

City Brooklyn State NY Zip Code 11207-8738

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8547**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** David Cardens

Mailing Address 250 Wortman Ave  
APT 4H

City Brooklyn State NY Zip Code 11207-8738

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8548**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Sharon Carnegie-Hall

Mailing Address 19419 115th Dr

City Saint Albans State NY Zip Code 11412-2705

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8513**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 75 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Tom Carpenter

Mailing Address 12 Sunset Drive

City Fredonia State NY Zip Code 14063-1629

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8365

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

1965.42

Full Name (Last, First, Middle Initial)

**B.** Tom Carpenter

Mailing Address 12 Sunset Drive

City Fredonia State NY Zip Code 14063-1629

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8674

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

1965.42

Full Name (Last, First, Middle Initial)

**C.** Brian Carr

Mailing Address 701 Lodi Street, Apt. 26

City Syracuse State NY Zip Code 13203

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8273

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

90.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4020.84

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 76 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Brian Carr

Mailing Address 701 Lodi Street, Apt. 26

City Syracuse State NY Zip Code 13203

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8333

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

282.50

Full Name (Last, First, Middle Initial)

**B.** Brian Carr

Mailing Address 701 Lodi Street, Apt. 26

City Syracuse State NY Zip Code 13203

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8564

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

245.00

Full Name (Last, First, Middle Initial)

**C.** Darry Castelihero

Mailing Address 204 Radcliff

City Nyack State NY Zip Code 10960

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9587

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

813.03

**SUBTOTAL** of Disbursements This Page (optional) .....

1340.53

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jamillia Centeno

Mailing Address 183 W. Ostrander Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8565**

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

**B.** Jamar Chamlee

Mailing Address 127 W 135th St  
APT 3A

City New York State NY Zip Code 10030-2927

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8439**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Lydia Chatman

Mailing Address 413 Beattie Street

City Syracuse State NY Zip Code 13224

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8566**

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

25.00

**SUBTOTAL** of Disbursements This Page (optional) .....

195.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Fred Clark

Mailing Address 13 Wolf Street

City State Zip Code  
Dolgeville NY 13329

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9209

Date of Disbursement

/   /

Amount of Each Disbursement this Period

147.89

Full Name (Last, First, Middle Initial)

**B.** Fred Clark

Mailing Address 13 Wolf Street

City State Zip Code  
Dolgeville NY 13329

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9288

Date of Disbursement

/   /

Amount of Each Disbursement this Period

44.09

Full Name (Last, First, Middle Initial)

**C.** Kristina Clark

Mailing Address 43 Westwood Drive

City State Zip Code  
Auburn NY 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9290

Date of Disbursement

/   /

Amount of Each Disbursement this Period

143.47

**SUBTOTAL** of Disbursements This Page (optional) .....

335.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Kristina Clark

Mailing Address 43 Westwood Drive

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9486

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**B.** Kristina Clark

Mailing Address 43 Westwood Drive

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9589

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**C.** Henry Clifford

Mailing Address 40 Gouverneur Street

City New York State NY Zip Code 10002

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8490

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

232.26

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Willie Coit

Mailing Address 163 Pleasant Street

City State Zip Code  
 Utica NY 13501

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9733**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

135.16

Full Name (Last, First, Middle Initial)

**B.** Willie Coit

Mailing Address 163 Pleasant Street

City State Zip Code  
 Utica NY 13501

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9488**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**C.** Norma Coleman

Mailing Address 1344 University Ave

City State Zip Code  
 Bronx NY 10452-4051

Purpose of Disbursement  
 GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9141**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

701.29

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 81 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Norma Coleman

Mailing Address 1344 University Ave

City State Zip Code  
Bronx NY 10452-4051

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8405**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**B.** Dulce Collado

Mailing Address 210 Sherman Ave  
APT 16J

City State Zip Code  
NEW YORK NY 10034-3356

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9128**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Dulce Collado

Mailing Address 210 Sherman Ave  
APT 16J

City State Zip Code  
NEW YORK NY 10034-3356

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8407**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 82 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Howard Collins

Mailing Address 81 Genesee Street, Apt. 2B-4

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9293**

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

110.22

Full Name (Last, First, Middle Initial)

**B.** Howard Collins

Mailing Address 81 Genesee Street, Apt. 2B-4

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9591**

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

132.38

Full Name (Last, First, Middle Initial)

**C.** Guadalupe Colon

Mailing Address 354 Madison St  
APT 6C

City New York State NY Zip Code 10002-5803

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8486**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

342.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 83 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Mary Connoy

Mailing Address 42 Falcon Circle

City  
Hampton

State  
NH

Zip Code  
03842

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8567

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** Kimberly Conway

Mailing Address 1400 Noyes Street

City  
Utica

State  
NY

Zip Code  
13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9295

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**C.** Kimberly Conway

Mailing Address 1400 Noyes Street

City  
Utica

State  
NY

Zip Code  
13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9490

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

**SUBTOTAL** of Disbursements This Page (optional) .....

149.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 84 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Deborah Cooper

Mailing Address 582-90 St Nicholas Ave

City NY State NY Zip Code 10030

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9123

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Deborah Cooper

Mailing Address 582-90 St Nicholas Ave

City NY State NY Zip Code 10030

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8401

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Love Cooper

Mailing Address 117-31 Inwood Street, Jamaica

City Queens State NY Zip Code 11434

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9135

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 85 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Love Cooper

Mailing Address 117-31 Inwood Street, Jamaica

City Queens State NY Zip Code 11434

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8414**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**B.** Pamela Corely

Mailing Address 12023 171st St

City Jamaica State NY Zip Code 11434-2603

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8510**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Edward Corley

Mailing Address 12023 171st St

City Jamaica State NY Zip Code 11434-2603

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8511**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 86 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Yasmin Cornelius

Mailing Address 1801 7th Avenue

City State Zip Code  
New York NY 10026

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8459

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Brian Costner

Mailing Address 129 W 147th St  
APT 12B

City State Zip Code  
New York NY 10039-4317

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8500

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Deborah G. Crocker

Mailing Address 131 Traver Rd.

City State Zip Code  
Gansevoort NY 12831

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9297

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

383.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 87 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Deborah G. Crocker

Mailing Address 131 Traver Rd.

City State Zip Code  
 Gansevoort NY 12831

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9492

Date of Disbursement

/   /

Amount of Each Disbursement this Period

44.09

Full Name (Last, First, Middle Initial)

**B.** James Cruz

Mailing Address 17037 118th Ave

City State Zip Code  
 Jamaica NY 11434-2215

Purpose of Disbursement  
 GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8530

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Narcisso Cruz

Mailing Address 35 Jackson St  
 APT 2C

City State Zip Code  
 New York NY 10002-6603

Purpose of Disbursement  
 GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8506

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

244.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 88 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Maurice Cummings**

Mailing Address 621 Macon St

City  
Brooklyn

State  
NY

Zip Code  
11233-1515

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8446**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**B. David Danielson**

Mailing Address 9 Mountain Street

City  
Plainfield

State  
MA

Zip Code  
01070

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9211**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

161.01

Full Name (Last, First, Middle Initial)

**C. David Danielson**

Mailing Address 9 Mountain Street

City  
Plainfield

State  
MA

Zip Code  
01070

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9299**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

289.40

**SUBTOTAL** of Disbursements This Page (optional) .....

600.41

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 89 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** David Danielson

Mailing Address 9 Mountain Street

City  
Plainfield

State  
MA

Zip Code  
01070

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8989**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

82.36

Full Name (Last, First, Middle Initial)

**B.** David Danielson

Mailing Address 9 Mountain Street

City  
Plainfield

State  
MA

Zip Code  
01070

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9802**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

137.93

Full Name (Last, First, Middle Initial)

**C.** Frankie Davidson

Mailing Address 109-30 160th St

City  
Jamaica

State  
NY

Zip Code  
11433-3253

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9134**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

420.29

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 90 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Frankie Davidson

Mailing Address 109-30 160th St

City  
Jamaica

State  
NY

Zip Code  
11433-3253

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8413

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 7 / 2 0 0 6

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**B.** Cory Davis

Mailing Address 200 W 143rd St  
APT 10D

City  
New York

State  
NY

Zip Code  
10030-1526

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8502

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 7 / 2 0 0 6

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Crystal Davis

Mailing Address 100 W 93rd St  
APT 26C

City  
NEW YORK

State  
NY

Zip Code  
10025-7587

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9126

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 0 / 3 1 / 2 0 0 6

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 91 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Crystal Davis

Mailing Address 100 W 93rd St  
APT 26C

City NEW YORK State NY Zip Code 10025-7587

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8404**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**B.** Elmore O. Davis

Mailing Address 713 Tallman Street

City Syracuse State NY Zip Code 13204

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9494**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

44.09

Full Name (Last, First, Middle Initial)

**C.** Elmore O. Davis

Mailing Address 713 Tallman Street

City Syracuse State NY Zip Code 13204

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9593**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

**SUBTOTAL** of Disbursements This Page (optional) .....

810.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 92 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Michael Davis

Mailing Address 776 Bleeker Street

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9301

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**B.** Michael Davis

Mailing Address 776 Bleeker Street

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9804

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.07

Full Name (Last, First, Middle Initial)

**C.** Michael Davis

Mailing Address 776 Bleeker Street

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9595

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

194.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 93 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Shamecca Davis

Mailing Address 968 Bronx Park S  
APT 102

City Bronx State NY Zip Code 10460-1619

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9125

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Shamecca Davis

Mailing Address 968 Bronx Park S  
APT 102

City Bronx State NY Zip Code 10460-1619

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8403

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**C.** Wanda Davis

Mailing Address 200 W 143rd St  
APT 20J

City New York State NY Zip Code 10030-1531

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9124

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 94 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Wanda Davis**

Mailing Address 200 W 143rd St  
APT 20J

City New York State NY Zip Code 10030-1531

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8402**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**B. Michael A. DeCerbo**

Mailing Address 1 Wheatsonte Court

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9715**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

126.85

Full Name (Last, First, Middle Initial)

**C. Michael A. DeCerbo**

Mailing Address 1 Wheatsonte Court

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9735**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

183.93

**SUBTOTAL** of Disbursements This Page (optional) .....

1010.78

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 95 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Michael A. DeCerro

Mailing Address 1 Wheatsonte Court

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9806**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

115.77

Full Name (Last, First, Middle Initial)

**B.** Michael A. DeCerro

Mailing Address 1 Wheatsonte Court

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9597**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

132.38

Full Name (Last, First, Middle Initial)

**C.** Mike DeCerro

Mailing Address 1 Wheatsonte Court

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8991**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

41.48

**SUBTOTAL** of Disbursements This Page (optional) .....

289.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 96 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Bernard Degraffenreid

Mailing Address 277 W 127th St

City  
New York

State  
NY

Zip Code  
10027-2902

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8441

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Sonny Degraffenreid

Mailing Address 137 W 134th St

City  
New York

State  
NY

Zip Code  
10030-3101

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8442

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Eric DeGrechie

Mailing Address 107 Caroline Street, Apt. D

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9213

Date of Disbursement

/   /

Amount of Each Disbursement this Period

29.85

**SUBTOTAL** of Disbursements This Page (optional) .....

229.85

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 97 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Eric DeGrechie

Mailing Address 107 Caroline Street, Apt. D

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9737

Date of Disbursement

/   /

Amount of Each Disbursement this Period

110.69

Full Name (Last, First, Middle Initial)

**B.** Eric DeGrechie

Mailing Address 107 Caroline Street, Apt. D

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8995

Date of Disbursement

/   /

Amount of Each Disbursement this Period

37.62

Full Name (Last, First, Middle Initial)

**C.** Eric DeGrechie

Mailing Address 107 Caroline Street, Apt. D

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9004

Date of Disbursement

/   /

Amount of Each Disbursement this Period

28.88

**SUBTOTAL** of Disbursements This Page (optional) .....

177.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 98 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Eric DeGrechie

Mailing Address 107 Caroline Street, Apt. D

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9496

Date of Disbursement

/   /

Amount of Each Disbursement this Period

79.91

Full Name (Last, First, Middle Initial)

**B.** Eric DeGrechie

Mailing Address 107 Caroline Street, Apt. D

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9599

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**C.** Rafael Delgado

Mailing Address 667 W 161st St  
Apt. 5F

City State Zip Code  
New York NY 10032-5534

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8425

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

246.04

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 99 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Marcus Demmon

Mailing Address 140 Greenbridge Drive

City Manlius State NY Zip Code 13104

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8334**

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

195.00

Full Name (Last, First, Middle Initial)

**B.** Marcus Demmon

Mailing Address 140 Greenbridge Drive

City Manlius State NY Zip Code 13104

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8568**

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

**C.** Jason Dennis

Mailing Address 5642 West Lake Rd.

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9303**

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

88.58

**SUBTOTAL** of Disbursements This Page (optional) .....

353.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 100 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jason Dennis

Mailing Address 5642 West Lake Rd.

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9851

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

93.50

Full Name (Last, First, Middle Initial)

**B.** Ralithia Dennis

Mailing Address 210 May Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8274

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

122.50

Full Name (Last, First, Middle Initial)

**C.** Ralithia Dennis

Mailing Address 210 May Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8335

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

20.00

**SUBTOTAL** of Disbursements This Page (optional) .....

236.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Ralithia Dennis

Mailing Address 210 May Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8569**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

110.00

Full Name (Last, First, Middle Initial)

**B.** Amy Dias

Mailing Address 274 Date Street

City Syracuse State NY Zip Code 13208

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8570**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C.** Lisa DiBartolomeo

Mailing Address 305 West 50th Street, Apt. 6A

City New York State NY Zip Code 10019

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8366**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2447.71

**SUBTOTAL** of Disbursements This Page (optional) .....

2587.71

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 102 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Lisa DiBartolomeo

Mailing Address 305 West 50th Street, Apt. 6A

City State Zip Code  
New York NY 10019

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8675

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2447.71

Full Name (Last, First, Middle Initial)

**B.** Rasaad Dillard

Mailing Address 2 Kennedy Plaza, #25 West

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9305

Date of Disbursement

/   /

Amount of Each Disbursement this Period

188.56

Full Name (Last, First, Middle Initial)

**C.** Rasaad Dillard

Mailing Address 2 Kennedy Plaza, #25 West

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9808

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.07

**SUBTOTAL** of Disbursements This Page (optional) .....

2731.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 103 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Rasaad Dillard

Mailing Address 2 Kennedy Plaza, #25 West

City State Zip Code  
 Utica NY 13502

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9601**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 11 / 15 / 2006

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Tiffany Dixie

Mailing Address 214 Elk Street

City State Zip Code  
 Syracuse NY 13208

Purpose of Disbursement  
 Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8336**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 10 / 31 / 2006

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C.** Tiffany Dixie

Mailing Address 214 Elk Street

City State Zip Code  
 Syracuse NY 13208

Purpose of Disbursement  
 Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8571**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 11 / 06 / 2006

Amount of Each Disbursement this Period

252.50

**SUBTOTAL** of Disbursements This Page (optional) .....

315.57

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Alfred Dominguez

Mailing Address 560 W 163rd St  
Apt. 22

City New York State NY Zip Code 10032-5809

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8422

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Erin Dooley

Mailing Address 132 North 5th Street, Apt. 2-I

City Brooklyn State NY Zip Code 11211

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8367

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

1362.75

Full Name (Last, First, Middle Initial)

**C.** John Douglass

Mailing Address 13808 Linden Blvd

City Jamaica State NY Zip Code 11436-1029

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8544

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1612.75

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** John Doyle

Mailing Address 28 Schoefield Street

City State Zip Code  
Bronx NY 10464

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8275**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

112.50

Full Name (Last, First, Middle Initial)

**B.** John Doyle

Mailing Address 28 Schoefield Street

City State Zip Code  
Bronx NY 10464

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8337**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

105.00

Full Name (Last, First, Middle Initial)

**C.** John Doyle

Mailing Address 14 Lexington Ave  
Apt 2b

City State Zip Code  
Buffalo NY 14222-1831

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8572**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

**SUBTOTAL** of Disbursements This Page (optional) .....

247.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 106 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jonnique Drewry

Mailing Address 81 Genesee Street, Apt. 5C-1

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9307

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 01 / 2006

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Aaron Drysdale

Mailing Address 257-25 14th Avenue

City Rosedale State NY Zip Code 11422

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8528

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Melissa Ebert

Mailing Address 3448 Walworth Rd.

City Walworth State NY Zip Code 14568

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8338

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 31 / 2006

Amount of Each Disbursement this Period

70.00

**SUBTOTAL** of Disbursements This Page (optional) .....

203.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Wynta Ebron

Mailing Address 1370 5th Ave  
APT 9D

City NEW YORK State NY Zip Code 10026-3108

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9121

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Wynta Ebron

Mailing Address 1370 5th Ave  
APT 9D

City NEW YORK State NY Zip Code 10026-3108

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8399

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

**C.** Raymond Edwards

Mailing Address 103 Raymond Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8573

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

30.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1330.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 108 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Thomas Edwards

Mailing Address 50 Pyramid Pines

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9309

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Matthew Ehlinger

Mailing Address 24 Summit Avenue

City State Zip Code  
Albany NY 12209

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8368

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1023.56

Full Name (Last, First, Middle Initial)

**C.** Matthew Ehlinger

Mailing Address 24 Summit Avenue

City State Zip Code  
Albany NY 12209

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8677

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1023.56

**SUBTOTAL** of Disbursements This Page (optional) .....

2080.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Sarah Ehrlich

Mailing Address 813 N. Broadway

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9311**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Alexander Einhorn

Mailing Address 193 Woodland Mead

City  
South Hamilton

State  
MA

Zip Code  
01982

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8385**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

546.18

Full Name (Last, First, Middle Initial)

**C.** Alexander Einhorn

Mailing Address 193 Woodland Mead

City  
South Hamilton

State  
MA

Zip Code  
01982

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8678**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

236.68

**SUBTOTAL** of Disbursements This Page (optional) .....

815.93

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 110 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Weusi Emerson

Mailing Address 120-32 178th Street

City State Zip Code  
St. Albans NY 11434

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8512**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Bridgette Emmanuel

Mailing Address 119-15 201st Avenue

City State Zip Code  
St. Albans NY 11412

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8536**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**C.** Ivestus Emmanuel

Mailing Address 11915 201st St

City State Zip Code  
Saint Albans NY 11412-3809

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8519**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 111 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Robert English

Mailing Address 882 Old Seneca Turnpike

City State Zip Code  
 Skaneateles NY 13152

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9498

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 8 / 2 0 0 6

Amount of Each Disbursement this Period

44.09

Full Name (Last, First, Middle Initial)

**B.** Robert English

Mailing Address 882 Old Seneca Turnpike

City State Zip Code  
 Skaneateles NY 13152

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9603

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**C.** Sam Eschenbrenner

Mailing Address 315 Euclid Avenue

City State Zip Code  
 Syracuse NY 13210

Purpose of Disbursement  
 Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8339

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 3 1 / 2 0 0 6

Amount of Each Disbursement this Period

75.00

**SUBTOTAL** of Disbursements This Page (optional) .....

185.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 112 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Winston Estrada

Mailing Address 60 E 102nd St

City New York State NY Zip Code 10029-6020

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8466**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Ann Falvey

Mailing Address 9278 Grange Hill Rd.

City New Hartford State NY Zip Code 13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9215**

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

62.92

Full Name (Last, First, Middle Initial)

**C.** Ann Falvey

Mailing Address 9278 Grange Hill Rd.

City New Hartford State NY Zip Code 13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9313**

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

99.20

**SUBTOTAL** of Disbursements This Page (optional) .....

262.12

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 113 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Sarah Feeny

Mailing Address 4 Adams Drive

City  
Woburn

State  
MA

Zip Code  
01801

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8276**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

**B.** Sarah Feeny

Mailing Address 4 Adams Drive

City  
Woburn

State  
MA

Zip Code  
01801

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8340**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Sarah Feeny

Mailing Address 4 Adams Drive

City  
Woburn

State  
MA

Zip Code  
01801

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8574**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

77.50

**SUBTOTAL** of Disbursements This Page (optional) .....

247.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 114 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jesus Fernandez

Mailing Address 10 Catherine Slip  
#17J

City New York State NY Zip Code 10038

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8488**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Alyse Fernando

Mailing Address 2400 West 140th St.

City New York State NY Zip Code 10030

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8495**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** FieldWorks

Mailing Address 2852 Connecticut Avenue, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8927**

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 115 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. FieldWorks**

Mailing Address 2852 Connecticut Avenue, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8936

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2006

Amount of Each Disbursement this Period

99.11

Full Name (Last, First, Middle Initial)

## **B. FieldWorks**

Mailing Address 2852 Connecticut Avenue, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8938

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2006

Amount of Each Disbursement this Period

9895.00

Full Name (Last, First, Middle Initial)

## **C. FieldWorks**

Mailing Address 2852 Connecticut Avenue, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8929

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2006

Amount of Each Disbursement this Period

1879.88

**SUBTOTAL** of Disbursements This Page (optional) .....

11873.99

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 116 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. FieldWorks**

Mailing Address 2852 Connecticut Avenue, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8932

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

## **B. FieldWorks**

Mailing Address 2852 Connecticut Avenue, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8934

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C. FieldWorks**

Mailing Address 2852 Connecticut Avenue, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8931

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

12000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

34500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 117 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. FieldWorks**

Mailing Address 2852 Connecticut Avenue, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8948

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2627.31

Full Name (Last, First, Middle Initial)

## **B. FieldWorks**

Mailing Address 2852 Connecticut Avenue, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8946

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1282.05

Full Name (Last, First, Middle Initial)

## **C. FieldWorks**

Mailing Address 2852 Connecticut Avenue, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8997

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4909.36

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 118 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Paul Figueron

Mailing Address 144 Harrison Avenue, PH,  
2nd Floor

City State Zip Code  
Yonkers NY 10705

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8575**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

152.50

Full Name (Last, First, Middle Initial)

**B.** LaShawn Ford

Mailing Address 164-72 West 141st St.

City State Zip Code  
New York NY 10031

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8468**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Anthony Frank

Mailing Address 916 Eagle Street

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9217**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.48

**SUBTOTAL** of Disbursements This Page (optional) .....

318.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 119 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Anthony Frank

Mailing Address 916 Eagle Street

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9739

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 1 / 2 0 0 6

Amount of Each Disbursement this Period

64.03

Full Name (Last, First, Middle Initial)

**B.** Anthony Frank

Mailing Address 916 Eagle Street

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9605

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

122.68

Full Name (Last, First, Middle Initial)

**C.** Geralyn Frank

Mailing Address 916 Eagle Street

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9717

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 0 / 2 5 / 2 0 0 6

Amount of Each Disbursement this Period

68.89

**SUBTOTAL** of Disbursements This Page (optional) .....

255.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 120 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Geralyn Frank

Mailing Address 916 Eagle Street

City State Zip Code  
 Utica NY 13501

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9741

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 11 / 01 / 2006

Amount of Each Disbursement this Period

160.09

Full Name (Last, First, Middle Initial)

**B.** Geralyn Frank

Mailing Address 916 Eagle Street

City State Zip Code  
 Utica NY 13501

Purpose of Disbursement  
 Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9034

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 11 / 06 / 2006

Amount of Each Disbursement this Period

11.31

Full Name (Last, First, Middle Initial)

**C.** Geralyn Frank

Mailing Address 916 Eagle Street

City State Zip Code  
 Utica NY 13501

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9500

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 11 / 08 / 2006

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

204.47

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 121 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Geralyn Frank

Mailing Address 916 Eagle Street

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9607

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

132.38

Full Name (Last, First, Middle Initial)

**B.** Geralyn Frank

Mailing Address 916 Eagle Street

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Recruitment Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9195

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 2 1 / 2 0 0 6

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** Fred E. Samuel Community Democratic Club

Mailing Address 190 West 135th Street

City State Zip Code  
New York NY 10030

Purpose of Disbursement  
GOTV Staging Site

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9043

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 6 / 2 0 0 6

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

982.38

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Morgani Freeman

Mailing Address 81 Genesee Street, Apt. 4A-4

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9315

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Morgani Freeman

Mailing Address 81 Genesee Street, Apt. 4A-4

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9609

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

132.38

Full Name (Last, First, Middle Initial)

**C.** Norman George

Mailing Address 119-36 171st

City St. Albans State NY Zip Code 11434

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8531

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

265.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 123 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Joe Gibson

Mailing Address 120 E 32nd St

City  
NEW YORK

State  
NY

Zip Code  
10016-5502

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9140

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**B.** Joe Gibson

Mailing Address 120 E 32nd St

City  
NEW YORK

State  
NY

Zip Code  
10016-5502

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8417

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**C.** Peter J. Gilbert

Mailing Address 21 Ellsworth Avenue

City  
Delmar

State  
NY

Zip Code  
12054

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9330

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

933.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 124 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Philip W. Giltner

Mailing Address 47 Albany Avenue,  
P.O. Box 47

City Kinderhook State NY Zip Code 12106

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8371**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1778.84

Full Name (Last, First, Middle Initial)

**B.** Philip W. Giltner

Mailing Address 47 Albany Avenue,  
P.O. Box 47

City Kinderhook State NY Zip Code 12106

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8681**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

790.12

Full Name (Last, First, Middle Initial)

**C.** Anthony Glover

Mailing Address 1660 Madison Ave  
APT 10H

City New York State NY Zip Code 10029-3118

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8503**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2668.96

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 125 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Wilson Gomez

Mailing Address 123 E 112th St

City New York State NY Zip Code 10029-2650

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8465**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Jared Gonya

Mailing Address 128 S. Fulton Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9333**

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

132.38

Full Name (Last, First, Middle Initial)

**C.** Jared Gonya

Mailing Address 128 S. Fulton Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9502**

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

77.15

**SUBTOTAL** of Disbursements This Page (optional) .....

309.53

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 126 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Joanne Gonzalez

Mailing Address 44 Jackson St  
APT 5D

City New York State NY Zip Code 10002-6638

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8481

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Christal Goode

Mailing Address 200 W 143rd St  
APT 20J

City New York State NY Zip Code 10030-1531

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8497

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Leslie Gorta

Mailing Address 76 Front Street, Apt. 1

City Ballston Spa State NY Zip Code 12020

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9219

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

66.13

**SUBTOTAL** of Disbursements This Page (optional) .....

266.13

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 127 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Leslie Gorta

Mailing Address 76 Front Street, Apt. 1

City State Zip Code  
 Ballston Spa NY 12020

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9743**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 1 / 2 0 0 6

Amount of Each Disbursement this Period

240.35

Full Name (Last, First, Middle Initial)

**B.** Leslie Gorta

Mailing Address 76 Front Street, Apt. 1

City State Zip Code  
 Ballston Spa NY 12020

Purpose of Disbursement  
 Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8987**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 2 / 2 0 0 6

Amount of Each Disbursement this Period

51.28

Full Name (Last, First, Middle Initial)

**C.** Leslie Gorta

Mailing Address 76 Front Street, Apt. 1

City State Zip Code  
 Ballston Spa NY 12020

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9810**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 8 / 2 0 0 6

Amount of Each Disbursement this Period

104.71

**SUBTOTAL** of Disbursements This Page (optional) .....

396.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 128 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Leslie Gorta

Mailing Address 76 Front Street, Apt. 1

City State Zip Code  
 Ballston Spa NY 12020

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9611

Date of Disbursement

/   /

Amount of Each Disbursement this Period

99.20

Full Name (Last, First, Middle Initial)

**B.** Leslie Gorta

Mailing Address 76 Front Street, Apt. 1

City State Zip Code  
 Ballston Spa NY 12020

Purpose of Disbursement  
 Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9106

Date of Disbursement

/   /

Amount of Each Disbursement this Period

23.63

Full Name (Last, First, Middle Initial)

**C.** Marion Govan

Mailing Address 130 W 135th St

City State Zip Code  
 New York NY 10030-2902

Purpose of Disbursement  
 GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8443

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

222.83

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 129 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Irving Gray

Mailing Address 8436 South Street Rd.

City State Zip Code  
Port Byron NY 13140

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9221

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 25 2006

Amount of Each Disbursement this Period

99.20

Full Name (Last, First, Middle Initial)

**B.** Irving Gray

Mailing Address 8436 South Street Rd.

City State Zip Code  
Port Byron NY 13140

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9745

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 01 2006

Amount of Each Disbursement this Period

312.55

Full Name (Last, First, Middle Initial)

**C.** Irving Gray

Mailing Address 8436 South Street Rd.

City State Zip Code  
Port Byron NY 13140

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8967

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 02 2006

Amount of Each Disbursement this Period

23.71

**SUBTOTAL** of Disbursements This Page (optional) .....

435.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 130 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Irving Gray

Mailing Address 8436 South Street Rd.

City Port Byron State NY Zip Code 13140

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9047

Date of Disbursement

/   /

Amount of Each Disbursement this Period

26.43

Full Name (Last, First, Middle Initial)

**B.** Irving Gray

Mailing Address 8436 South Street Rd.

City Port Byron State NY Zip Code 13140

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9504

Date of Disbursement

/   /

Amount of Each Disbursement this Period

184.10

Full Name (Last, First, Middle Initial)

**C.** Irving Gray

Mailing Address 8436 South Street Rd.

City Port Byron State NY Zip Code 13140

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9613

Date of Disbursement

/   /

Amount of Each Disbursement this Period

161.01

**SUBTOTAL** of Disbursements This Page (optional) .....

371.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 131 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Aokeema Green

Mailing Address 250 Wortman Ave  
APT 4H

City Brooklyn State NY Zip Code 11207-8738

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9773

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Caroline Griffin

Mailing Address 8 Myton Lane

City Menands State NY Zip Code 12204

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8372

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 31 / 2006

Amount of Each Disbursement this Period

1122.05

Full Name (Last, First, Middle Initial)

**C.** Edel Guevara

Mailing Address 1072 James Street, Apt. B16

City Syracuse State NY Zip Code 13203

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8576

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 06 / 2006

Amount of Each Disbursement this Period

42.50

**SUBTOTAL** of Disbursements This Page (optional) .....

1264.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 132 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Rowan Hall

Mailing Address 19419 115th Dr

City Saint Albans State NY Zip Code 11412-2705

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8515**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Hannaford Food & Drug

Mailing Address 1112 Commercial Drive

City New Hartford State NY Zip Code 13413

Purpose of Disbursement  
Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9194**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

915.35

Full Name (Last, First, Middle Initial)

**C.** Damian R. Hanson

Mailing Address 8C Quiet Harbor Drive

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9223**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

1048.42

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 133 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Damian R. Hanson

Mailing Address 8C Quiet Harbor Drive

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D9335

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.82

Full Name (Last, First, Middle Initial)

**B.** Carrie Hanton

Mailing Address 277 West 140th St  
#1A

City State Zip Code  
New York NY 10030

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D8452

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Pearline Hanton

Mailing Address 277 West 140th St  
#1A

City State Zip Code  
New York NY 10030

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D8453

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

235.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 134 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Cyria Hargrett

Mailing Address 142 Ballantyne Rd., Apt. 4

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8608**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** Brittany Harris

Mailing Address 2040 South Avenue

City Syracuse State NY Zip Code 13207

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8277**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

115.00

Full Name (Last, First, Middle Initial)

**C.** Brittany Harris

Mailing Address 2040 South Avenue

City Syracuse State NY Zip Code 13207

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8341**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

**SUBTOTAL** of Disbursements This Page (optional) .....

195.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 135 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Brittany Harris

Mailing Address 2040 South Avenue

City Syracuse State NY Zip Code 13207

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8577**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

**B.** Calvin Harris

Mailing Address 1941 S. Salina Street

City Syracuse State NY Zip Code 13204

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8278**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**C.** Calvin Harris

Mailing Address 1941 S. Salina Street

City Syracuse State NY Zip Code 13204

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8342**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

22.50

**SUBTOTAL** of Disbursements This Page (optional) .....

247.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 136 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Calvin Harris

Mailing Address 1941 S. Salina Street

City Syracuse State NY Zip Code 13204

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8578**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12.50

Full Name (Last, First, Middle Initial)

**B.** Donna Hawkins

Mailing Address 2299 7th Avenue

City New York State NY Zip Code 10030

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8456**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Sandra Hawkins

Mailing Address 135 W 96th Street,  
Apt. 8E

City New York State NY Zip Code 10025-6437

Purpose of Disbursement  
GOTV Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9032**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12055.00

**SUBTOTAL** of Disbursements This Page (optional) .....

12167.50

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 137 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Christopher Hayden

Mailing Address 199 Thimbleberry Rd.

City State Zip Code  
Ballston Spa NY 12020

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9812

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

120.34

Full Name (Last, First, Middle Initial)

**B.** Matthew M. Healy

Mailing Address 134 Spring Street

City State Zip Code  
Albany NY 12203

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9337

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**C.** Matthew M. Healy

Mailing Address 134 Spring Street

City State Zip Code  
Albany NY 12203

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9506

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

68.94

**SUBTOTAL** of Disbursements This Page (optional) .....

222.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 138 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Matthew M. Healy

Mailing Address 134 Spring Street

City Albany State NY Zip Code 12203

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9615

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

122.68

Full Name (Last, First, Middle Initial)

**B.** Desiderio Hernandez

Mailing Address 560 W 163rd St  
Apt. 22

City New York State NY Zip Code 10032-5809

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8428

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ramon Hernandez

Mailing Address 558 E 181st St  
APT 3E

City Bronx State NY Zip Code 10457-1647

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8493

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

322.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 139 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Roberto Hernandez

Mailing Address 1700 Bedford Ave  
APT 3F

City Brooklyn State NY Zip Code 11225-2603

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8546**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Walter Hernandez

Mailing Address 154 Broome St

City New York State NY Zip Code 10002-4057

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8491**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**C.** Hugo Herrera

Mailing Address 3863 10th Ave

City New York State NY Zip Code 10034-1849

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8430**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 140 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Michael Hessinston

Mailing Address 200 W 143rd St  
APT 20E

City New York State NY Zip Code 10030-1531

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8504**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Beejay Hicks

Mailing Address 277 West 140th St  
#1A

City New York State NY Zip Code 10030

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8454**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Lindsay A. Hilton

Mailing Address 24 Lawton Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9225**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

233.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 141 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Lindsay A. Hilton

Mailing Address 24 Lawton Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9747

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

186.72

Full Name (Last, First, Middle Initial)

**B.** Lindsay A. Hilton

Mailing Address 24 Lawton Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9814

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

73.85

Full Name (Last, First, Middle Initial)

**C.** Lindsay A. Hilton

Mailing Address 24 Lawton Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9617

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

122.68

**SUBTOTAL** of Disbursements This Page (optional) .....

383.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 142 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Tim Hilton

Mailing Address 40 Aurelius Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9339

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.42

Full Name (Last, First, Middle Initial)

**B.** Tim Hilton

Mailing Address 40 Aurelius Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9508

Date of Disbursement

/   /

Amount of Each Disbursement this Period

77.15

Full Name (Last, First, Middle Initial)

**C.** Tim Hilton

Mailing Address 40 Aurelius Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9619

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.42

**SUBTOTAL** of Disbursements This Page (optional) .....

335.99

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 143 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Stephen Hilyer

Mailing Address 24 Lawton Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9227

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**B.** Stephen Hilyer

Mailing Address 24 Lawton Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9749

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

195.62

Full Name (Last, First, Middle Initial)

**C.** Stephen Hilyer

Mailing Address 24 Lawton Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8969

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

21.35

**SUBTOTAL** of Disbursements This Page (optional) .....

283.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 144 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Stephen Hilyer

Mailing Address 24 Lawton Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9510

Date of Disbursement

/   /

Amount of Each Disbursement this Period

77.15

Full Name (Last, First, Middle Initial)

**B.** Stephen Hilyer

Mailing Address 24 Lawton Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9621

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.42

Full Name (Last, First, Middle Initial)

**C.** Frank Hoare

Mailing Address 43 Aspinwall Rd.

City Loudonville State NY Zip Code 12211

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8373

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3873.49

**SUBTOTAL** of Disbursements This Page (optional) .....

4080.06

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 145 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Frank Hoare

Mailing Address 43 Aspinwall Rd.

City Loudonville State NY Zip Code 12211

Purpose of Disbursement  
Petty Cash Replenishment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9031

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

2200.00

Full Name (Last, First, Middle Initial)

**B.** Frank Hoare

Mailing Address 43 Aspinwall Rd.

City Loudonville State NY Zip Code 12211

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8684

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

3873.49

Full Name (Last, First, Middle Initial)

**C.** Jeffrey Holland

Mailing Address 27 Hampden DI

City Utica State NY Zip Code 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9229

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

50.11

**SUBTOTAL** of Disbursements This Page (optional) .....

6123.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 146 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jeffrey Holland

Mailing Address 27 Hampden DI

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9341

Date of Disbursement

/   /

Amount of Each Disbursement this Period

44.09

Full Name (Last, First, Middle Initial)

**B.** Jeffrey Holland

Mailing Address 27 Hampden DI

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8961

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19.95

Full Name (Last, First, Middle Initial)

**C.** Jeffrey Holland

Mailing Address 27 Hampden DI

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9816

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.03

**SUBTOTAL** of Disbursements This Page (optional) .....

128.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 147 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jeffrey Holland

Mailing Address 27 Hampden DI

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9853

Date of Disbursement

/   /

Amount of Each Disbursement this Period

83.68

Full Name (Last, First, Middle Initial)

**B.** Zachary G. Hollander

Mailing Address 139 Court Street, Apt. 3

City State Zip Code  
Brooklyn NY 11201

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8374

Date of Disbursement

/   /

Amount of Each Disbursement this Period

534.48

Full Name (Last, First, Middle Initial)

**C.** Zachary G. Hollander

Mailing Address 139 Court Street, Apt. 3

City State Zip Code  
Brooklyn NY 11201

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8685

Date of Disbursement

/   /

Amount of Each Disbursement this Period

235.07

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

853.23

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 148 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Richard J. Horner, Jr.

Mailing Address 303 Edgewood Avenue

City State Zip Code  
Tonawanda NY 14223

Purpose of Disbursement  
Field Consulting-Non-Candidate Specific

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8949**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.** Richard J. Horner, Jr.

Mailing Address 303 Edgewood Avenue

City State Zip Code  
Tonawanda NY 14223

Purpose of Disbursement  
Field Consulting-Non-Candidate Specific

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8612**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

-10000.00

Void Prior Period Check

Full Name (Last, First, Middle Initial)

**C.** Richard J. Horner, Jr.

Mailing Address 303 Edgewood Avenue

City State Zip Code  
Tonawanda NY 14223

Purpose of Disbursement  
Field Consulting-Non-Candidate Specific

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8615**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 149 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Stephanie Hudson

Mailing Address 2 Kennedy Plaza, #25W

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9231**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.57

Full Name (Last, First, Middle Initial)

**B.** Stephanie Hudson

Mailing Address 2 Kennedy Plaza, #25W

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9343**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

193.18

Full Name (Last, First, Middle Initial)

**C.** Stephanie Hudson

Mailing Address 2 Kennedy Plaza, #25W

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9818**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

59.50

**SUBTOTAL** of Disbursements This Page (optional) .....

283.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 150 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Stephanie Hudson

Mailing Address 2 Kennedy Plaza, #25W

City State Zip Code  
 Utica NY 13502

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9623

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

129.88

Full Name (Last, First, Middle Initial)

**B.** Laurie A. Hughes

Mailing Address 514 Warren Street

City State Zip Code  
 Hudson NY 12534

Purpose of Disbursement  
 Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8375

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 3 1 / 2 0 0 6

Amount of Each Disbursement this Period

809.13

Full Name (Last, First, Middle Initial)

**C.** Laurie A. Hughes

Mailing Address 514 Warren Street

City State Zip Code  
 Hudson NY 12534

Purpose of Disbursement  
 Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8686

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

361.59

**SUBTOTAL** of Disbursements This Page (optional) .....

1300.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 151 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Patricia Ingles

Mailing Address 648 Water St

City  
New York

State  
NY

Zip Code  
10002-8138

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8484**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Mark Ingraham

Mailing Address 5 Knight Way

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9719**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

27.56

Full Name (Last, First, Middle Initial)

**C.** Mark Ingraham

Mailing Address 5 Knight Way

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9751**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

27.56

**SUBTOTAL** of Disbursements This Page (optional) .....

155.12

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 152 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** John Ivinski

Mailing Address 7553 Hamilton Rd.

City Hamilton State NY Zip Code 13346

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9233

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

73.48

Full Name (Last, First, Middle Initial)

**B.** Randy Jackson

Mailing Address 305 Fountain Ave

City Brooklyn State NY Zip Code 11208-4362

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8433

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Robert Jacobs

Mailing Address 108 Hathorn Blvd.

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9721

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

60.63

**SUBTOTAL** of Disbursements This Page (optional) .....

234.11

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 153 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Robert Jacobs

Mailing Address 108 Hathorn Blvd.

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9345

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**B.** Robert Jacobs

Mailing Address 108 Hathorn Blvd.

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9028

Date of Disbursement

/   /

Amount of Each Disbursement this Period

41.65

Full Name (Last, First, Middle Initial)

**C.** Robert Jacobs

Mailing Address 108 Hathorn Blvd.

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9512

Date of Disbursement

/   /

Amount of Each Disbursement this Period

99.20

**SUBTOTAL** of Disbursements This Page (optional) .....

206.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 154 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Robert Jacobs

Mailing Address 108 Hathorn Blvd.

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9625

Date of Disbursement

/   /

Amount of Each Disbursement this Period

99.20

Full Name (Last, First, Middle Initial)

**B.** Francisco Javier

Mailing Address 75 Taller St.  
#5B

City State Zip Code  
New York NY 10040

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8420

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**C.** Lauren Jensen

Mailing Address 801 Sunnycrest Rd., Apt. 2

City State Zip Code  
Syracuse NY 13206

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8279

Date of Disbursement

/   /

Amount of Each Disbursement this Period

125.00

**SUBTOTAL** of Disbursements This Page (optional) .....

374.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 155 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Lauren Jensen

Mailing Address 801 Sunnycrest Rd., Apt. 2

City State Zip Code  
Syracuse NY 13206

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8343**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

225.00

Full Name (Last, First, Middle Initial)

**B.** Lauren Jensen

Mailing Address 801 Sunnycrest Rd., Apt. 2

City State Zip Code  
Syracuse NY 13206

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8579**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Robert D. Johnsen

Mailing Address 15 Caroline Street

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9235**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

508.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 156 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Robert D. Johnsen

Mailing Address 15 Caroline Street

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9820

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 8 / 2 0 0 6

Amount of Each Disbursement this Period

26.18

Full Name (Last, First, Middle Initial)

**B.** Charles Johnson

Mailing Address 1815 S. Salina Street

City State Zip Code  
Syracuse NY 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8280

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 0 / 2 5 / 2 0 0 6

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

**C.** Charles Johnson

Mailing Address 1815 S. Salina Street

City State Zip Code  
Syracuse NY 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8344

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 0 / 3 1 / 2 0 0 6

Amount of Each Disbursement this Period

57.50

**SUBTOTAL** of Disbursements This Page (optional) .....

153.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 157 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Charles Johnson

Mailing Address 1815 S. Salina Street

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8580**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

67.50

Full Name (Last, First, Middle Initial)

**B.** Jeanine Johnson

Mailing Address 725 Riverside Dr  
Apt. 8G

City New York State NY Zip Code 10031-2452

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8458**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** John Johnson

Mailing Address 14325 110th Ave

City Jamaica State NY Zip Code 11435-5605

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8535**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

467.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 158 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Reginald Johnson

Mailing Address 187 W 135th St

City New York State NY Zip Code 10030-2946

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8474**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Lolita Jones

Mailing Address 203 1/2 Cherry Street Rear

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8581**

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

102.50

Full Name (Last, First, Middle Initial)

**C.** Al Kanu

Mailing Address 167-52 188th Avenue

City Jamaica State NY Zip Code 11433

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8524**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

302.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 159 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Maureen Kelly

Mailing Address 24 Walnut Street

City  
Corinth

State  
NY

Zip Code  
12822

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9237**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Maureen Kelly

Mailing Address 24 Walnut Street

City  
Corinth

State  
NY

Zip Code  
12822

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9347**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

22.96

Full Name (Last, First, Middle Initial)

**C.** Maureen Kelly

Mailing Address 24 Walnut Street

City  
Corinth

State  
NY

Zip Code  
12822

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8984**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

23.98

**SUBTOTAL** of Disbursements This Page (optional) .....

80.01

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 160 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Whitney Kemp

Mailing Address 71 Slate Creek Drive

City Cheektowaga State NY Zip Code 14227

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8376**

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

875.34

Full Name (Last, First, Middle Initial)

**B.** Whitney Kemp

Mailing Address 71 Slate Creek Drive

City Cheektowaga State NY Zip Code 14227

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8687**

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

875.34

Full Name (Last, First, Middle Initial)

**C.** Tim Kemper

Mailing Address 300 Fayette Drive

City Fayetteville State NY Zip Code 13066

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8281**

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

70.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1820.68

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 161 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Tim Kemper

Mailing Address 300 Fayette Drive

City Fayetteville State NY Zip Code 13066

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8345**

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

125.00

Full Name (Last, First, Middle Initial)

**B.** Tim Kemper

Mailing Address 300 Fayette Drive

City Fayetteville State NY Zip Code 13066

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8582**

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

137.50

Full Name (Last, First, Middle Initial)

**C.** Erin Keyser

Mailing Address 34 Chase Ln

City Ithaca State NY Zip Code 14850

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9514**

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

77.15

**SUBTOTAL** of Disbursements This Page (optional) .....

339.65

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 162 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Erin Keyser

Mailing Address 34 Chase Ln

City Ithaca State NY Zip Code 14850

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9627

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

129.42

Full Name (Last, First, Middle Initial)

**B.** Sean T. Kite

Mailing Address 6 Mason Lane

City Slingerlands State NY Zip Code 12159

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9349

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**C.** Sean T. Kite

Mailing Address 6 Mason Lane

City Slingerlands State NY Zip Code 12159

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9516

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

132.09

**SUBTOTAL** of Disbursements This Page (optional) .....

294.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 163 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Sean T. Kite

Mailing Address 6 Mason Lane

City Slingerlands State NY Zip Code 12159

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9855

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.03

Full Name (Last, First, Middle Initial)

**B.** Yelena Kolova

Mailing Address 2662 E. 26th Street, Apt. 3B

City Brooklyn State NY Zip Code 11235

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9896

Date of Disbursement

/   /

Amount of Each Disbursement this Period

126.36

Full Name (Last, First, Middle Initial)

**C.** Trisha Kratzenberg

Mailing Address 135 Colonial Cricle, Apt. 5N

City Ilion State NY Zip Code 13357

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9895

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

223.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 164 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Trisha Kratzberg

Mailing Address 135 Colonial Cricle, Apt. 5N

City Ilion State NY Zip Code 13357

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9753**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

63.38

Full Name (Last, First, Middle Initial)

**B.** Ruth H. Lamphere

Mailing Address 2159 Moravia-Venice Town Line Rd.

City Moravia State NY Zip Code 13118

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9240**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

84.50

Full Name (Last, First, Middle Initial)

**C.** Ruth H. Lamphere

Mailing Address 2159 Moravia-Venice Town Line Rd.

City Moravia State NY Zip Code 13118

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9352**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

180.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 165 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Wayne Lawrence

Mailing Address 1420 Washington Ave

City State Zip Code  
Bronx NY 10456-1910

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8501**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Patrick Layden

Mailing Address 7 Sycamore Drive

City State Zip Code  
Queensbury NY 12804

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8377**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 31 / 2006

Amount of Each Disbursement this Period

546.18

Full Name (Last, First, Middle Initial)

**C.** Patrick Layden

Mailing Address 7 Sycamore Drive

City State Zip Code  
Queensbury NY 12804

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8688**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 15 / 2006

Amount of Each Disbursement this Period

236.68

**SUBTOTAL** of Disbursements This Page (optional) .....

882.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 166 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Eddie Lee

Mailing Address 135 W 96th St

City  
New York

State  
NY

Zip Code  
10025-6468

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D8475

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**B.** Ronny Lee

Mailing Address 866 E. Water Street, Apt. A15-2

City  
Syracuse

State  
NY

Zip Code  
13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D8282

Date of Disbursement

/   /

Amount of Each Disbursement this Period

117.50

Full Name (Last, First, Middle Initial)

**C.** Ronny Lee

Mailing Address 866 E. Water Street, Apt. A15-2

City  
Syracuse

State  
NY

Zip Code  
13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D8346

Date of Disbursement

/   /

Amount of Each Disbursement this Period

110.00

**SUBTOTAL** of Disbursements This Page (optional) .....

377.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 167 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Ronny Lee

Mailing Address 866 E. Water Street, Apt. A15-2

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8583**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

85.00

Full Name (Last, First, Middle Initial)

**B.** Mario Lefrane

Mailing Address 167 W 133rd St

City New York State NY Zip Code 10030-3310

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8450**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Steven Leland

Mailing Address 16127 130th Avenue

City Rochdale Village State NY Zip Code 11434

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8534**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

335.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 168 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Lisa Lengwe

Mailing Address 224 Genesee Park Drive

City Syracuse State NY Zip Code 13224

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8283**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

52.50

Full Name (Last, First, Middle Initial)

**B.** Lisa Lengwe

Mailing Address 224 Genesee Park Drive

City Syracuse State NY Zip Code 13224

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8347**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

55.00

Full Name (Last, First, Middle Initial)

**C.** Stefan Lepak

Mailing Address A8 Standart Woods Apts.

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9755**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.03

**SUBTOTAL** of Disbursements This Page (optional) .....

171.53

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 169 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Stefan Lepak

Mailing Address A8 Standart Woods Apts.

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9822

Date of Disbursement

/   /

Amount of Each Disbursement this Period

103.32

Full Name (Last, First, Middle Initial)

**B.** Daniel Levine

Mailing Address 4 Victoria Ln

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9757

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.03

Full Name (Last, First, Middle Initial)

**C.** Daniel Levine

Mailing Address 4 Victoria Ln

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9629

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

200.42

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 170 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Mike Levine

Mailing Address 19 Granite Street

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9242

Date of Disbursement

/   /

Amount of Each Disbursement this Period

89.40

Full Name (Last, First, Middle Initial)

**B.** Mike Levine

Mailing Address 19 Granite Street

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9759

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.03

Full Name (Last, First, Middle Initial)

**C.** Mike Levine

Mailing Address 19 Granite Street

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9518

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

186.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 171 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Mike Levine

Mailing Address 19 Granite Street

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9857

Date of Disbursement

/   /

Amount of Each Disbursement this Period

93.50

Full Name (Last, First, Middle Initial)

**B.** Roy E. Licorish, III

Mailing Address 11526 198th St

City State Zip Code  
Saint Albans NY 11412-2829

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8532

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Heather Lockhart

Mailing Address 45 Robinwood Drive

City State Zip Code  
Clifton Park NY 12065

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9244

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

226.57

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 172 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Heather Lockhart

Mailing Address 45 Robinwood Drive

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9354

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Heather Lockhart

Mailing Address 45 Robinwood Drive

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9824

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

38.58

Full Name (Last, First, Middle Initial)

**C.** Heather Lockhart

Mailing Address 45 Robinwood Drive

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9631

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

104.72

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 173 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Lionel Logan

Mailing Address 348 W. Kennedy Street

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8584

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

167.50

Full Name (Last, First, Middle Initial)

**B.** Rodney Lowery

Mailing Address 1182 Vyse Ave  
# 2

City Bronx State NY Zip Code 10459-1965

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8492

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** LSG Strategies, LLC

Mailing Address 2120 L Street, NW  
Suite 305

City Washington State DC Zip Code 20037

Purpose of Disbursement  
Voter ID Calls

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8916

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

7625.75

**SUBTOTAL** of Disbursements This Page (optional) .....

7893.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 174 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** LSG Strategies, LLC

Mailing Address 2120 L Street, NW  
Suite 305

City Washington State DC Zip Code 20037

Purpose of Disbursement  
GOTV Calls-Generic

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9711

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 15 / 2006

Amount of Each Disbursement this Period

26466.85

Full Name (Last, First, Middle Initial)

**B.** Kate Lucas

Mailing Address 267 W 152nd St  
APT 2F

City New York State NY Zip Code 10039-1844

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8451

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Leroy Lucas

Mailing Address 208 W 148th St

City New York State NY Zip Code 10039-3102

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8455

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

26666.85

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 175 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Mona Lucas

Mailing Address 36 W 138th St

City New York State NY Zip Code 10037-1718

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8473**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** David Luciano

Mailing Address 927 Lansing Street

City Utica State NY Zip Code 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9356**

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

35.82

Full Name (Last, First, Middle Initial)

**C.** Rex Lyons

Mailing Address 14 N. Holmes Street

City Scotia State NY Zip Code 12302

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9358**

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

122.68

**SUBTOTAL** of Disbursements This Page (optional) .....

258.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 176 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Rex Lyons

Mailing Address 14 N. Holmes Street

City Scotia State NY Zip Code 12302

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9520

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

44.09

Full Name (Last, First, Middle Initial)

**B.** Rex Lyons

Mailing Address 14 N. Holmes Street

City Scotia State NY Zip Code 12302

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9859

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

64.03

Full Name (Last, First, Middle Initial)

**C.** Michael MacDonald

Mailing Address 1918 Baker Avenue

City Utica State NY Zip Code 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9360

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

66.13

**SUBTOTAL** of Disbursements This Page (optional) .....

174.25

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 177 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Michael MacDonald

Mailing Address 1918 Baker Avenue

City State Zip Code  
Utica NY 13501

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8955**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8.75

Full Name (Last, First, Middle Initial)

**B.** Michael MacDonald

Mailing Address 1918 Baker Avenue

City State Zip Code  
Utica NY 13501

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9522**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

99.20

Full Name (Last, First, Middle Initial)

**C.** Michael MacDonald

Mailing Address 1918 Baker Avenue

City State Zip Code  
Utica NY 13501

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9633**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.42

**SUBTOTAL** of Disbursements This Page (optional) .....

237.37

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 178 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Mack Crouse Group, LLC

Mailing Address 4900 Seminary Rd., Suite 1020

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Exempt Mail-Support Arcuri

Candidate Name  
Michael A. Arcuri

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 24

Transaction ID: D8267

Date of Disbursement

10 / 23 / 2006

Amount of Each Disbursement this Period

42064.10

Full Name (Last, First, Middle Initial)

**B.** Mack Crouse Group, LLC

Mailing Address 4900 Seminary Rd., Suite 1020

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Exempt Mail-Oppose Meier

Candidate Name  
Michael A. Arcuri

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 24

Transaction ID: D8325

Date of Disbursement

10 / 30 / 2006

Amount of Each Disbursement this Period

36153.24

Full Name (Last, First, Middle Initial)

**C.** Mack Crouse Group, LLC

Mailing Address 4900 Seminary Rd., Suite 1020

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Exempt Mail-Support Arcuri

Candidate Name  
Michael A. Arcuri

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 24

Transaction ID: D8326

Date of Disbursement

10 / 30 / 2006

Amount of Each Disbursement this Period

17411.80

**SUBTOTAL** of Disbursements This Page (optional) .....

95629.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 179 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Krissy Magown

Mailing Address Cazenovia College,  
Box 1485

City Cazenovia State NY Zip Code 13035

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8284**

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**B.** Krissy Magown

Mailing Address Cazenovia College,  
Box 1485

City Cazenovia State NY Zip Code 13035

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8348**

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C.** Brian Maith

Mailing Address 317 W 121st St

City New York State NY Zip Code 10027-6163

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8460**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

160.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 180 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Bilal Malik

Mailing Address 557 Rockaway Blvd.  
#3A

City Brooklyn State NY Zip Code 11212

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8471

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Quantrina Manning

Mailing Address 420 Rich Street

City Syracuse State NY Zip Code 13207

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8703

Date of Disbursement

/   /

Amount of Each Disbursement this Period

80.00

Full Name (Last, First, Middle Initial)

**C.** Mercedes Marrero

Mailing Address 2949 Frederick Douglass Blvd  
Apt. 12N

City New York State NY Zip Code 10039-1338

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8426

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

280.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 181 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Ann Marshall

Mailing Address 23303 Linden Blvd

City  
Cambria Heights

State  
NY

Zip Code  
11411-1843

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8525**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Katrina Marshall

Mailing Address 1374 County Route 28

City  
Pulaski

State  
NY

Zip Code  
13142

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8285**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

45.00

Full Name (Last, First, Middle Initial)

**C.** Katrina Marshall

Mailing Address 1374 County Route 28

City  
Pulaski

State  
NY

Zip Code  
13142

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8349**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

102.50

**SUBTOTAL** of Disbursements This Page (optional) .....

247.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 182 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Katrina Marshall

Mailing Address 1374 County Route 28

City Pulaski State NY Zip Code 13142

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8585**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**B.** Glennys Martes

Mailing Address 72 Wadsworth Terrace  
Apt. 3A

City New York State NY Zip Code 10040-3064

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8431**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Michael McBean

Mailing Address 14732 Glassboro Ave

City Jamaica State NY Zip Code 11435-5724

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8521**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

230.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 183 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jasmine McBride

Mailing Address 236 McLennan Avenue

City Syracuse State NY Zip Code 13207

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8586**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

105.00

Full Name (Last, First, Middle Initial)

**B.** Darren McCabe

Mailing Address 563 Cafferty Hill Rd.

City Endicott State NY Zip Code 13760

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8378**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1023.56

Full Name (Last, First, Middle Initial)

**C.** Darren McCabe

Mailing Address 563 Cafferty Hill Rd.

City Endicott State NY Zip Code 13760

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8691**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1023.56

**SUBTOTAL** of Disbursements This Page (optional) .....

2152.12

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 184 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** John McCullough

Mailing Address 102 1/2 Ontario

City Albany State NY Zip Code 12206

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9524

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 8 / 2 0 0 6

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Ryan McMillin

Mailing Address 1419 Salt Springs Rd.

City Syracuse State NY Zip Code 13214

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8353

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 0 / 3 1 / 2 0 0 6

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** Brittanie McMullen

Mailing Address 223 East Avenue, Apt. 2B

City Syracuse State NY Zip Code 13224

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8587

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 6 / 2 0 0 6

Amount of Each Disbursement this Period

97.50

**SUBTOTAL** of Disbursements This Page (optional) .....

180.57

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 185 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Eric McMullen

Mailing Address 326 Furman Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8588**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

82.50

Full Name (Last, First, Middle Initial)

**B.** Carl McShall

Mailing Address 2960 Fredrick Douglas Blvd

City NY State NY Zip Code 10039

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9127**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Carl McShall

Mailing Address 2960 Fredrick Douglas Blvd

City NY State NY Zip Code 10039

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8406**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1282.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 186 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Diego Medrano

Mailing Address Flint Hall Mailbox 310

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8286**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

57.50

Full Name (Last, First, Middle Initial)

**B.** Diego Medrano

Mailing Address Flint Hall Mailbox 310

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8361**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

127.50

Full Name (Last, First, Middle Initial)

**C.** Diego Medrano

Mailing Address Flint Hall Mailbox 310

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8589**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

62.00

**SUBTOTAL** of Disbursements This Page (optional) .....

247.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 187 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Metro Strategies, LLC

Mailing Address 895 Broadway,  
5th Floor

City New York State NY Zip Code 10003

Purpose of Disbursement  
GOTV Mailing-Generic

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8940**

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

12135.83

Full Name (Last, First, Middle Initial)

**B.** Metro Strategies, LLC

Mailing Address 895 Broadway,  
5th Floor

City New York State NY Zip Code 10003

Purpose of Disbursement  
Phone Calls-Generic

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8942**

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

10928.00

Full Name (Last, First, Middle Initial)

**C.** Metro Strategies, LLC

Mailing Address 895 Broadway,  
5th Floor

City New York State NY Zip Code 10003

Purpose of Disbursement  
Phone Calls-Generic

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9192**

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

27387.45

**SUBTOTAL** of Disbursements This Page (optional) .....

50451.28

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 188 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Metro Strategies, LLC

Mailing Address 895 Broadway,  
5th Floor

City New York State NY Zip Code 10003

Purpose of Disbursement  
Phone Calls-Generic

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9193

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

26845.57

Full Name (Last, First, Middle Initial)

**B.** Joelle Milea

Mailing Address 3065 Warners Rd.

City Warners State NY Zip Code 13164

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8590

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C.** Mission Control, Inc.

Mailing Address 201 Adams St.

City Manchester State CT Zip Code 06040

Purpose of Disbursement  
Exempt Mail-Oppose Sweeney

Candidate Name  
Kirsten Gillibrand

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 20

Transaction ID: D8266

Date of Disbursement

10 / 23 / 2006

Amount of Each Disbursement this Period

37735.51

**SUBTOTAL** of Disbursements This Page (optional) .....

64611.08

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 189 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Mission Control, Inc.

Mailing Address 201 Adams St.

City Manchester State CT Zip Code 06040

Purpose of Disbursement  
Exempt Mail-Oppose Sweeney

Candidate Name  
Kirsten Gillibrand

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 20

Transaction ID: D8324

Date of Disbursement

10 / 30 / 2006

Amount of Each Disbursement this Period

18815.51

Full Name (Last, First, Middle Initial)

**B.** Mission Control, Inc.

Mailing Address 201 Adams St.

City Manchester State CT Zip Code 06040

Purpose of Disbursement  
Exempt Mail

Candidate Name  
Kirsten Gillibrand

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 20

Transaction ID: D8609

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

19240.51

Oppose Sweeney/Support Gi-  
librand

Full Name (Last, First, Middle Initial)

**C.** Mission Control, Inc.

Mailing Address 201 Adams St.

City Manchester State CT Zip Code 06040

Purpose of Disbursement  
GOTV Mailing-Generic

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9705

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

44966.82

**SUBTOTAL** of Disbursements This Page (optional) .....

83022.84

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 190 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Monique Mitchel

Mailing Address 515 Cortland Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8591

Date of Disbursement

/   /

Amount of Each Disbursement this Period

172.50

Full Name (Last, First, Middle Initial)

**B.** Luisanna Molina

Mailing Address 1035 Grand Concourse  
APT 4BN

City Bronx State NY Zip Code 10452-9160

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9132

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** Luisanna Molina

Mailing Address 1035 Grand Concourse  
APT 4BN

City Bronx State NY Zip Code 10452-9160

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8411

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1172.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 191 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Paul Moore

Mailing Address 44 Jackson St  
APT 4B

City New York State NY Zip Code 10002-6638

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8479

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Nydia Moreno

Mailing Address 350 Madison Ave

City New York State NY Zip Code 10017-3700

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8487

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Otoniel Moreno

Mailing Address 354 Madison St  
APT 2A

City New York State NY Zip Code 10002-5802

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8485

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 192 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Alicia Morris

Mailing Address 252 Grant Blvd., Apt. 4

City Syracuse State NY Zip Code 13206

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8287

Date of Disbursement

/   /

Amount of Each Disbursement this Period

111.50

Full Name (Last, First, Middle Initial)

**B.** Alicia Morris

Mailing Address 252 Grant Blvd., Apt. 4

City Syracuse State NY Zip Code 13206

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8350

Date of Disbursement

/   /

Amount of Each Disbursement this Period

267.50

Full Name (Last, First, Middle Initial)

**C.** Alicia Morris

Mailing Address 252 Grant Blvd., Apt. 4

City Syracuse State NY Zip Code 13206

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8592

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

629.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 193 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Mike Morrison

Mailing Address 15028 122nd Ave

City  
Jamaica

State  
NY

Zip Code  
11434-2338

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8529**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Mullen & Company

Mailing Address 1101 Pennsylvania Avenue,  
5th Floor

City  
Washington

State  
DC

Zip Code  
20004

Purpose of Disbursement  
Exempt Mail-Massa

Candidate Name  
Eric Massa

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 29

**Transaction ID: D8944**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C.** Chisunka Mumba

Mailing Address 1016 Meadowbrook Drive

City  
Syracuse

State  
NY

Zip Code  
13224

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8593**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2135.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 194 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Colleen Musa

Mailing Address 6 Golf Avenue

City New Hartford State NY Zip Code 13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9723**

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

286.28

Full Name (Last, First, Middle Initial)

**B.** Colleen Musa

Mailing Address 6 Golf Avenue

City New Hartford State NY Zip Code 13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9761**

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

286.28

Full Name (Last, First, Middle Initial)

**C.** Colleen Musa

Mailing Address 6 Golf Avenue

City New Hartford State NY Zip Code 13413

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8963**

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

23.28

**SUBTOTAL** of Disbursements This Page (optional) .....

595.84

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 195 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Colleen Musa

Mailing Address 6 Golf Avenue

City New Hartford State NY Zip Code 13413

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8953**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9.80

Full Name (Last, First, Middle Initial)

**B.** Colleen Musa

Mailing Address 6 Golf Avenue

City New Hartford State NY Zip Code 13413

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8965**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.20

Full Name (Last, First, Middle Initial)

**C.** Colleen Musa

Mailing Address 6 Golf Avenue

City New Hartford State NY Zip Code 13413

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9826**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

173.68

**SUBTOTAL** of Disbursements This Page (optional) .....

208.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 196 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Colleen Musa

Mailing Address 6 Golf Avenue

City State Zip Code  
New Hartford NY 13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9861

Date of Disbursement

/   /

Amount of Each Disbursement this Period

173.68

Full Name (Last, First, Middle Initial)

**B.** Avira Myer

Mailing Address 227 Grove Street

City State Zip Code  
Mount Kisco NY 10549

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9634

Date of Disbursement

/   /

Amount of Each Disbursement this Period

478.93

Full Name (Last, First, Middle Initial)

**C.** Michelle Myers

Mailing Address 104 Goodrich Avenue

City State Zip Code  
Syracuse NY 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8288

Date of Disbursement

/   /

Amount of Each Disbursement this Period

52.50

**SUBTOTAL** of Disbursements This Page (optional) .....

705.11

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 197 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Arden Nash-kwiecien

Mailing Address 22 Wellington Drive

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9364

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**B.** NCEC Services, inc

Mailing Address 122 C Street, NW, Suite 650

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Voter File Development Non-Cand. Spec.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8555

Date of Disbursement

/   /

Amount of Each Disbursement this Period

27905.48

Full Name (Last, First, Middle Initial)

**C.** Richard Neal

Mailing Address 692 E. 188th Street

City  
Bronx

State  
NY

Zip Code  
10458

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8507

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

28071.61

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 198 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Marvin Nelson

Mailing Address 2611 Genesee Street, #3 North

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9763**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

135.16

Full Name (Last, First, Middle Initial)

**B.** Marvin Nelson

Mailing Address 2611 Genesee Street, #3 North

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9042**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

31.15

Full Name (Last, First, Middle Initial)

**C.** Marvin Nelson

Mailing Address 2611 Genesee Street, #3 North

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9526**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

**SUBTOTAL** of Disbursements This Page (optional) .....

232.44

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 199 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Marvin Nelson

Mailing Address 2611 Genesee Street, #3 North

City State Zip Code  
Utica NY 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9636**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 15 / 2006

Amount of Each Disbursement this Period

132.38

Full Name (Last, First, Middle Initial)

**B.** Frank P. Nemeth

Mailing Address 21 High Dune Dr

City State Zip Code  
Albany NY 12203-5322

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8379**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 31 / 2006

Amount of Each Disbursement this Period

2811.24

Full Name (Last, First, Middle Initial)

**C.** Frank P. Nemeth

Mailing Address 21 High Dune Dr

City State Zip Code  
Albany NY 12203-5322

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8694**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 15 / 2006

Amount of Each Disbursement this Period

2811.24

**SUBTOTAL** of Disbursements This Page (optional) .....

5754.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 200 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Joshua Nervina

Mailing Address 23 Pulaski Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9415

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Marthe Ngwashi

Mailing Address 224 Genesee Park Drive

City Syracuse State NY Zip Code 13224

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8381

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1246.95

Full Name (Last, First, Middle Initial)

**C.** Marthe Ngwashi

Mailing Address 224 Genesee Park Drive

City Syracuse State NY Zip Code 13224

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8696

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1246.95

**SUBTOTAL** of Disbursements This Page (optional) .....

2526.97

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 201 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** James Noble

Mailing Address 714 Saint Anns Ave

City State Zip Code  
Bronx NY 10455-1441

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9130

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** James Noble

Mailing Address 714 Saint Anns Ave

City State Zip Code  
Bronx NY 10455-1441

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8409

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**C.** Christine Nougim

Mailing Address 15 Spring Avenue

City State Zip Code  
Latham NY 12110

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9414

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

1233.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 202 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jessica Nowlin

Mailing Address 18 Schalren Drive

City Latham State NY Zip Code 12110

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8382

Date of Disbursement

/   /

Amount of Each Disbursement this Period

940.35

Full Name (Last, First, Middle Initial)

**B.** Jessica Nowlin

Mailing Address 18 Schalren Drive

City Latham State NY Zip Code 12110

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8697

Date of Disbursement

/   /

Amount of Each Disbursement this Period

940.35

Full Name (Last, First, Middle Initial)

**C.** Ashley O'Brian

Mailing Address 4532 Route 38A

City Skaneateles State NY Zip Code 13152

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9418

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

**SUBTOTAL** of Disbursements This Page (optional) .....

1946.83

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 203 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Ashley O'Brian

Mailing Address 4532 Route 38A

City State Zip Code  
 Skaneateles NY 13152

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9528

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 8 / 2 0 0 6

Amount of Each Disbursement this Period

109.72

Full Name (Last, First, Middle Initial)

**B.** Ashley O'Brian

Mailing Address 4532 Route 38A

City State Zip Code  
 Skaneateles NY 13152

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9638

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

98.70

Full Name (Last, First, Middle Initial)

**C.** William H. O'Donovan

Mailing Address 32 Circular Street

City State Zip Code  
 Lake Luzerne NY 12846

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9765

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 1 / 2 0 0 6

Amount of Each Disbursement this Period

93.69

**SUBTOTAL** of Disbursements This Page (optional) .....

302.11

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 204 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Lisa Oelfke

Mailing Address 404 Gair Street

City  
Piermont

State  
NY

Zip Code  
10968

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9246

Date of Disbursement

/   /

Amount of Each Disbursement this Period

219.97

Full Name (Last, First, Middle Initial)

**B.** Lisa Oelfke

Mailing Address 404 Gair Street

City  
Piermont

State  
NY

Zip Code  
10968

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9421

Date of Disbursement

/   /

Amount of Each Disbursement this Period

368.84

Full Name (Last, First, Middle Initial)

**C.** Lisa Oelfke

Mailing Address 404 Gair Street

City  
Piermont

State  
NY

Zip Code  
10968

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9530

Date of Disbursement

/   /

Amount of Each Disbursement this Period

219.97

**SUBTOTAL** of Disbursements This Page (optional) .....

808.78

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 205 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Lisa Oelfke

Mailing Address 404 Gair Street

City  
Piermont

State  
NY

Zip Code  
10968

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9863**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

160.92

Full Name (Last, First, Middle Initial)

**B.** Ryan O'Leary

Mailing Address 4 Embassy Lane

City  
Andover

State  
MA

Zip Code  
01810

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8289**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

62.50

Full Name (Last, First, Middle Initial)

**C.** Carl Oliver

Mailing Address 179-15 143rd

City  
Springfield Garden

State  
NY

Zip Code  
11434

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8539**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

323.42

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 206 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Constantine Orfan

Mailing Address 39A Arthur Avenue

City  
Cortland

State  
NY

Zip Code  
13045

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9567**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

135.00

Full Name (Last, First, Middle Initial)

**B.** Matthew Ortiz

Mailing Address 450 Screvin Ave

City  
Bronx

State  
NY

Zip Code  
10473-1810

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9138**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** Matthew Ortiz

Mailing Address 450 Screvin Ave

City  
Bronx

State  
NY

Zip Code  
10473-1810

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8416**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1135.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 207 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Frank Owens

Mailing Address 11431 147th St

City  
Jamaica

State  
NY

Zip Code  
11436-1114

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8523**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Ricky Pace

Mailing Address 336 Renwick Avenue

City  
Syracuse

State  
NY

Zip Code  
13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8614**

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**C.** Adrienne Padula

Mailing Address 858 Livingston Avenue, Apt. 2

City  
Syracuse

State  
NY

Zip Code  
13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8594**

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

107.50

**SUBTOTAL** of Disbursements This Page (optional) .....

407.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 208 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jacqueline Paredes

Mailing Address 119 Benson Street

City Albany State NY Zip Code 12206-1218

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8383**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

897.00

Full Name (Last, First, Middle Initial)

**B.** Jacqueline Paredes

Mailing Address 119 Benson Street

City Albany State NY Zip Code 12206-1218

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8699**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

897.00

Full Name (Last, First, Middle Initial)

**C.** Rebekah Patnode

Mailing Address 119 Lockes Village Rd.

City Wendell State MA Zip Code 01379

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9427**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

464.77

**SUBTOTAL** of Disbursements This Page (optional) .....

2258.77

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 209 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Rebekah Patnode

Mailing Address 119 Lockes Village Rd.

City State Zip Code  
Wendell MA 01379

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9532

Date of Disbursement

MM / DD / YYYY  
11 / 08 / 2006

Amount of Each Disbursement this Period

382.92

Full Name (Last, First, Middle Initial)

**B.** PAYCHEX

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City State Zip Code  
Piscataway NJ 08854

Purpose of Disbursement  
Payroll Taxes/Withholdings

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9876

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2006

Amount of Each Disbursement this Period

2670.70

Full Name (Last, First, Middle Initial)

**C.** PAYCHEX

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City State Zip Code  
Piscataway NJ 08854

Purpose of Disbursement  
Payroll Taxes/Withholdings

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9879

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2006

Amount of Each Disbursement this Period

15605.95

**SUBTOTAL** of Disbursements This Page (optional) .....

18659.57

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 210 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Taxes/Withholdings

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9885

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

2020.31

Full Name (Last, First, Middle Initial)

## **B. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Taxes/Withholdings

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9889

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

13212.89

Full Name (Last, First, Middle Initial)

## **C. Donovan Peartree**

Mailing Address 123 W 135th St

City New York State NY Zip Code 10030-2930

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8449

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

15333.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 211 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Javaris Perry

Mailing Address 328 Flatbush Ave

City  
Brooklyn

State  
NY

Zip Code  
11238-4302

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8543**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Charmaine Peters

Mailing Address 177-52 Ursina Road

City  
St Albans

State  
NY

Zip Code  
11434

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9119**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Charmaine Peters

Mailing Address 177-52 Ursina Road

City  
St Albans

State  
NY

Zip Code  
11434

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8397**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 212 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Stephanie Pileski

Mailing Address 4096 Rockwell Rd.

City Marcellus State NY Zip Code 13108

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8359

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

22.50

Full Name (Last, First, Middle Initial)

**B.** John Pitts

Mailing Address 11436 146th St

City Jamaica State NY Zip Code 11436-1109

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8538

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Nick Pizzariello

Mailing Address 1302 Enclave Circle

City Nashville State TN Zip Code 37211

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9430

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

147.16

**SUBTOTAL** of Disbursements This Page (optional) .....

269.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 213 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Evan Pointer

Mailing Address 250 Wortman Ave  
APT 4H

City Brooklyn State NY Zip Code 11207-8738

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8550

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Jamal Polk

Mailing Address 225 E 149th St  
APT 22C

City Bronx State NY Zip Code 10451-5531

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9117

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Jamal Polk

Mailing Address 225 E 149th St  
APT 22C

City Bronx State NY Zip Code 10451-5531

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8395

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 214 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Postmaster

Mailing Address 421 8th Avenue,  
Attn: Window #76

City New York State NY Zip Code 10001-9998

Purpose of Disbursement  
GOTV Mailing-Generic

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9704

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

4848.15

Full Name (Last, First, Middle Initial)

**B.** Kendella Preston

Mailing Address 820 E 180th Street, Apt. 2U

City Bronx State NY Zip Code 10460-1334

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8469

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Prime New York

Mailing Address 233 Broadway  
Suite 3612

City New York State NY Zip Code 10279

Purpose of Disbursement  
Voter File Develop-Non-Candidate Spec.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8557

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

21000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

25948.15

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 215 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Kevin Primo

Mailing Address 137-52 233rd Street

City L.A. State NY Zip Code 11413

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8520**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Frances Purcell

Mailing Address 1169 Nostrand Avenue

City Brooklyn State NY Zip Code 11225

Purpose of Disbursement  
GOTV Staging Site

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9045**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Michael Purcell

Mailing Address 117 Grand Avenue

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9434**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

**SUBTOTAL** of Disbursements This Page (optional) .....

666.13

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 216 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Daniel Quimby

Mailing Address 191 Seymour Street, Apt. 3

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9432

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

77.15

Full Name (Last, First, Middle Initial)

**B.** Daniel Quimby

Mailing Address 191 Seymour Street, Apt. 3

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9049

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

59.68

Full Name (Last, First, Middle Initial)

**C.** Daniel Quimby

Mailing Address 191 Seymour Street, Apt. 3

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9828

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

139.21

**SUBTOTAL** of Disbursements This Page (optional) .....

276.04

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 217 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Daniel Quimby

Mailing Address 191 Seymour Street, Apt. 3

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9640

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.42

Full Name (Last, First, Middle Initial)

**B.** Christopher R. Rackl

Mailing Address 9040 County Rd.

City Clarence Center State NY Zip Code 14032

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8384

Date of Disbursement

/   /

Amount of Each Disbursement this Period

381.12

Full Name (Last, First, Middle Initial)

**C.** Christopher R. Rackl

Mailing Address 9040 County Rd.

City Clarence Center State NY Zip Code 14032

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8700

Date of Disbursement

/   /

Amount of Each Disbursement this Period

381.12

**SUBTOTAL** of Disbursements This Page (optional) .....

891.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 218 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Yezziz Ramos

Mailing Address 2224 2nd Ave

City  
New York

State  
NY

Zip Code  
10029-2228

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8464**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Irhad Rascic

Mailing Address 14 Colonial Drive

City  
New Hartford

State  
NY

Zip Code  
13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9436**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.48

Full Name (Last, First, Middle Initial)

**C.** Irhad Rascic

Mailing Address 14 Colonial Drive

City  
New Hartford

State  
NY

Zip Code  
13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9534**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

199.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 219 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Irhad Rascic

Mailing Address 14 Colonial Drive

City State Zip Code  
New Hartford NY 13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9642

Date of Disbursement

/   /

Amount of Each Disbursement this Period

122.68

Full Name (Last, First, Middle Initial)

**B.** Jatiah Reed

Mailing Address 364 Cortland Avenue

City State Zip Code  
Syracuse NY 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8290

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

**C.** Jatiah Reed

Mailing Address 364 Cortland Avenue

City State Zip Code  
Syracuse NY 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8351

Date of Disbursement

/   /

Amount of Each Disbursement this Period

52.50

**SUBTOTAL** of Disbursements This Page (optional) .....

235.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 220 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jatiah Reed

Mailing Address 364 Cortland Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8595**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

**B.** REM Printing

Mailing Address 55 Railroad Avenue

City Albany State NY Zip Code 12205

Purpose of Disbursement  
Exempt Mail-Massa

Candidate Name  
Eric Massa

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 29

**Transaction ID: D8943**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8023.32

Full Name (Last, First, Middle Initial)

**C.** REM Printing

Mailing Address 55 Railroad Avenue

City Albany State NY Zip Code 12205

Purpose of Disbursement  
Generic GOTV Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9282**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8367.63

**SUBTOTAL** of Disbursements This Page (optional) .....

16425.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 221 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Kirstie Reynoso

Mailing Address Lemoyne College,  
Dablon Hall 404

City Syracuse State NY Zip Code 13214

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8596**

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**B.** Steven C. Rice

Mailing Address 161 Hoags Corners Rd.

City East Nassau State NY Zip Code 12062

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9438**

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**C.** Theresa Richardson

Mailing Address 200 W 143rd St  
APT 13G

City New York State NY Zip Code 10030-1527

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8498**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

163.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 222 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Virgil Richardson

Mailing Address 200 W 143rd St  
APT 20M

City New York State NY Zip Code 10030-1531

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8496

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** James Rivera

Mailing Address 180 South St  
APT 16D

City New York State NY Zip Code 10038-1419

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8505

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Toby Rivera

Mailing Address 212 Willis Ave  
APT 2S

City Bronx State NY Zip Code 10454-4840

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8508

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 223 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Hiachira Rivera

Mailing Address 141 Webster Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8597

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

77.50

Full Name (Last, First, Middle Initial)

**B.** Samuel D. Roberts

Mailing Address 220 Miles Ave.

City Syracuse State NY Zip Code 13210-3118

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8291

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

62.25

Full Name (Last, First, Middle Initial)

**C.** Scott Robinson

Mailing Address 507 Park Avenue

City Medina State NY Zip Code 14103

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9440

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

526.05

**SUBTOTAL** of Disbursements This Page (optional) .....

665.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 224 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Scott Robinson

Mailing Address 507 Park Avenue

City  
Medina

State  
NY

Zip Code  
14103

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D8951**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12.25

Full Name (Last, First, Middle Initial)

**B.** Scott Robinson

Mailing Address 507 Park Avenue

City  
Medina

State  
NY

Zip Code  
14103

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D9830**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

354.07

Full Name (Last, First, Middle Initial)

**C.** Richard Rodriguez

Mailing Address 734 Brandywine Avenue

City  
Schenectady

State  
NY

Zip Code  
12308

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D9832**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

46.85

**SUBTOTAL** of Disbursements This Page (optional) .....

413.17

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 225 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Nelson Rolon

Mailing Address 38 Rutgers St  
APT 4E

City New York State NY Zip Code 10002-7415

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8489**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Dustin Root

Mailing Address 57 Lincoln Avenue

City Cortland State NY Zip Code 13045

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9568**

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**C.** Hector Rosado

Mailing Address 182 South St

City New York State NY Zip Code 10038-1435

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8483**

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 226 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Benjamin Rosen

Mailing Address 470 Montgomery St  
APT 1E

City Brooklyn State NY Zip Code 11225-3060

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8448**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Jennifer Rossetti

Mailing Address 6365 New Venture Gear Drive

City Syracuse State NY Zip Code 13057

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8292**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

**C.** Jennifer Rossetti

Mailing Address 6365 New Venture Gear Drive

City Syracuse State NY Zip Code 13057

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8362**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

**SUBTOTAL** of Disbursements This Page (optional) .....

340.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 227 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Cristin Ruddy

Mailing Address 246 Sawmill Rd.

City Pulaski State NY Zip Code 13142

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8293**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

45.00

Full Name (Last, First, Middle Initial)

**B.** Cristin Ruddy

Mailing Address 246 Sawmill Rd.

City Pulaski State NY Zip Code 13142

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8352**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

105.00

Full Name (Last, First, Middle Initial)

**C.** Cristin Ruddy

Mailing Address 246 Sawmill Rd.

City Pulaski State NY Zip Code 13142

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8598**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

**SUBTOTAL** of Disbursements This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 228 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Esma Rudolph

Mailing Address 14028 173rd St

City State Zip Code  
Jamaica NY 11434-4626

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8517

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Sasha Rudolph

Mailing Address 14028 173rd St

City State Zip Code  
Jamaica NY 11434-4626

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8537

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Lynette Ruffin

Mailing Address 557 Rockaway Blvd.  
#3A

City State Zip Code  
Brooklyn NY 11212

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8470

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 229 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Richard Ryan

Mailing Address 4151 Craines Mills Rd.

City Truxton State NY Zip Code 13158

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9834

Date of Disbursement

/   /

Amount of Each Disbursement this Period

32.15

Full Name (Last, First, Middle Initial)

**B.** Valerie Ryan

Mailing Address P.O. Box 383

City Selkirk State NY Zip Code 12158

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9900

Date of Disbursement

/   /

Amount of Each Disbursement this Period

31.57

Full Name (Last, First, Middle Initial)

**C.** Barbara Sabbour

Mailing Address 1545 Neilson Street

City Utica State NY Zip Code 13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9644

Date of Disbursement

/   /

Amount of Each Disbursement this Period

132.38

**SUBTOTAL** of Disbursements This Page (optional) .....

196.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 230 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jared Sagendorf

Mailing Address 104 Pershing Avenue

City Wynantskill State NY Zip Code 12198

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9538

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Antonio Sanchez

Mailing Address 10 Catherine Slip  
#11J

City New York State NY Zip Code 10038

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8482

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Jasmine Sanchez

Mailing Address 711 Ocean Ave

City Brooklyn State NY Zip Code 11226-4978

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8545

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

233.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 231 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Sally Santangelo

Mailing Address 107 Cora Avenue

City Syracuse State NY Zip Code 13212

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8294

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

149.50

Full Name (Last, First, Middle Initial)

**B.** Sally Santangelo

Mailing Address 107 Cora Avenue

City Syracuse State NY Zip Code 13212

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8354

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

120.00

Full Name (Last, First, Middle Initial)

**C.** Justine Sataniello

Mailing Address 56 Pearl Street

City North Woodmere State NY Zip Code 11581

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8599

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional) .....

319.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 232 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Lisa Scerbo

Mailing Address 80 Route 423

City State Zip Code  
Mechanicville NY 12118

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9248**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

88.86

Full Name (Last, First, Middle Initial)

**B.** Lisa Scerbo

Mailing Address 80 Route 423

City State Zip Code  
Mechanicville NY 12118

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9767**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

203.55

Full Name (Last, First, Middle Initial)

**C.** Lisa Scerbo

Mailing Address 80 Route 423

City State Zip Code  
Mechanicville NY 12118

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8982**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.90

**SUBTOTAL** of Disbursements This Page (optional) .....

353.31

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 233 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Lisa Scerbo

Mailing Address 80 Route 423

City State Zip Code  
Mechanicville NY 12118

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9002

Date of Disbursement

/   /

Amount of Each Disbursement this Period

18.20

Full Name (Last, First, Middle Initial)

**B.** Lisa Scerbo

Mailing Address 80 Route 423

City State Zip Code  
Mechanicville NY 12118

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9540

Date of Disbursement

/   /

Amount of Each Disbursement this Period

164.95

Full Name (Last, First, Middle Initial)

**C.** Lisa Scerbo

Mailing Address 80 Route 423

City State Zip Code  
Mechanicville NY 12118

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9646

Date of Disbursement

/   /

Amount of Each Disbursement this Period

99.20

**SUBTOTAL** of Disbursements This Page (optional) .....

282.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 234 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Stephanie Scerbo

Mailing Address 80 Route 423

City State Zip Code  
 Mechanicville NY 12118

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9836

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 8 / 2 0 0 6

Amount of Each Disbursement this Period

46.85

Full Name (Last, First, Middle Initial)

**B.** Stephanie Scerbo

Mailing Address 80 Route 423

City State Zip Code  
 Mechanicville NY 12118

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9837

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**C.** Jennifer Schneider

Mailing Address 25 Shamrock Drive

City State Zip Code  
 Brookfield CT 06804

Purpose of Disbursement  
 Field Consulting-Non-Candidate Specific

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8264

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 2 0 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1112.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 235 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jennifer Schneider

Mailing Address 25 Shamrock Drive

City  
Brookfield

State  
CT

Zip Code  
06804

Purpose of Disbursement  
Field Consulting-Non-Candidate Specific

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8553**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Jennifer Schneider

Mailing Address 25 Shamrock Drive

City  
Brookfield

State  
CT

Zip Code  
06804

Purpose of Disbursement  
Field Consulting-Non-Candidate Specific

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8702**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Celeste Scott

Mailing Address 171 Odell Clark Pl  
# 4B

City  
New York

State  
NY

Zip Code  
10030-2356

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8457**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 236 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Rebecca Sears

Mailing Address 418 E 89th St.  
Apt. 1C

City New York State NY Zip Code 10128-6778

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9442

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

44.09

Full Name (Last, First, Middle Initial)

**B.** Sentron Associates, Inc.

Mailing Address 6 Newton Street

City Albany State NY Zip Code 12205

Purpose of Disbursement  
Exempt Mail-Massa

Candidate Name  
Eric Massa

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 29

Transaction ID: D8925

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

3888.00

Full Name (Last, First, Middle Initial)

**C.** Scott Shalett

Mailing Address 2120 L Street, NW, Suite 305

City Washington State DC Zip Code 20037

Purpose of Disbursement  
GOTV Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8985

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

10000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

13932.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 237 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Kayleigh Shaw

Mailing Address 1850 Cazenovia College

City Cazenovia State NY Zip Code 13035

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8358**

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

22.50

Full Name (Last, First, Middle Initial)

**B.** Mike Shellinger

Mailing Address 5200 Brockway Lane

City Fayetteville State NY Zip Code 13066

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8295**

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C.** Mike Shellinger

Mailing Address 5200 Brockway Lane

City Fayetteville State NY Zip Code 13066

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8355**

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

60.00

**SUBTOTAL** of Disbursements This Page (optional) .....

112.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 238 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Shirley Huntley for State Senator

Mailing Address 43 Broadway

City Valley Stream State NY Zip Code 11580

Purpose of Disbursement  
GOTV Staging Site

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9044

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Tyre Shuck

Mailing Address 431 Marion St

City Brooklyn State NY Zip Code 11233-2775

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8447

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Indra Sieunarine

Mailing Address 168-14 127th Avenue  
Section 2D

City Rochdale State NY Zip Code 11434

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8516

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 239 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Ken Silverman

Mailing Address 271 Louder Rd.

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9725**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

68.89

Full Name (Last, First, Middle Initial)

**B.** Ken Silverman

Mailing Address 271 Louder Rd.

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9772**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

104.71

Full Name (Last, First, Middle Initial)

**C.** Ken Silverman

Mailing Address 271 Louder Rd.

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9776**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

134.37

**SUBTOTAL** of Disbursements This Page (optional) .....

307.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 240 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Ken Silverman

Mailing Address 271 Louder Rd.

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8980**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

55.13

Full Name (Last, First, Middle Initial)

**B.** Ken Silverman

Mailing Address 271 Louder Rd.

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9839**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

134.37

Full Name (Last, First, Middle Initial)

**C.** Ken Silverman

Mailing Address 271 Louder Rd.

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9865**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

113.78

**SUBTOTAL** of Disbursements This Page (optional) .....

303.28

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 241 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Mary Simard

Mailing Address 5688 Northshor Rd.

City Brantingham State NY Zip Code 13312

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9250

Date of Disbursement

/   /

Amount of Each Disbursement this Period

55.11

Full Name (Last, First, Middle Initial)

**B.** Mary Simard

Mailing Address 5688 Northshor Rd.

City Brantingham State NY Zip Code 13312

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9444

Date of Disbursement

/   /

Amount of Each Disbursement this Period

88.18

Full Name (Last, First, Middle Initial)

**C.** Mary Simard

Mailing Address 5688 Northshor Rd.

City Brantingham State NY Zip Code 13312

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9038

Date of Disbursement

/   /

Amount of Each Disbursement this Period

34.30

**SUBTOTAL** of Disbursements This Page (optional) .....

177.59

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 242 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Mary Simard

Mailing Address 5688 Northshor Rd.

City Brantingham State NY Zip Code 13312

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9542

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Mary Simard

Mailing Address 5688 Northshor Rd.

City Brantingham State NY Zip Code 13312

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9902

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**C.** Heather Simon

Mailing Address 815 N. Broadway

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9651

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

132.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 243 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Andrea Simonelli

Mailing Address 9731 Nalad Drive

City  
Clarkston

State  
MI

Zip Code  
48348

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9649**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

587.76

Full Name (Last, First, Middle Initial)

**B.** Nicholas Sinagra

Mailing Address 9 S. Frank Street, Apt. O

City

Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9446**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

11.02

Full Name (Last, First, Middle Initial)

**C.** Carlas Sledge

Mailing Address 23 Barber Street, #4

City

Auburn

State  
NY

Zip Code  
13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9448**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

**SUBTOTAL** of Disbursements This Page (optional) .....

664.91

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 244 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jemal Smith

Mailing Address 1950 E Tremont Ave  
APT 4B

City Bronx State NY Zip Code 10462-5608

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8434**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Rasheida T. Smith

Mailing Address 10531 Remington St

City Jamaica State NY Zip Code 11435-5009

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8533**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**C.** Viesha Smith

Mailing Address 2427 E. Genesee Street

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8600**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

75.00

**SUBTOTAL** of Disbursements This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 245 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** David Sokol

Mailing Address 44 Worth Street

City Granville State NY Zip Code 12832

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9252

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** David Sokol

Mailing Address 44 Worth Street

City Granville State NY Zip Code 12832

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9778

Date of Disbursement

/   /

Amount of Each Disbursement this Period

174.53

Full Name (Last, First, Middle Initial)

**C.** David Sokol

Mailing Address 44 Worth Street

City Granville State NY Zip Code 12832

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9653

Date of Disbursement

/   /

Amount of Each Disbursement this Period

132.38

**SUBTOTAL** of Disbursements This Page (optional) .....

339.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 246 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Mercedes Soriano

Mailing Address 558 W 164th St  
# 43

City New York State NY Zip Code 10032-4921

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8427

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Elizabeth A. Soto

Mailing Address 8 Tower Hill Rd.

City Pawling State NY Zip Code 12564

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9654

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

471.99

Full Name (Last, First, Middle Initial)

**C.** Robert C. Squires

Mailing Address 8 Van Dorn Street

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9780

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

68.89

**SUBTOTAL** of Disbursements This Page (optional) .....

640.88

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 247 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Robert C. Squires

Mailing Address 8 Van Dorn Street

City  
Saratoga Springs

State  
NY

Zip Code  
12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9841**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

27.56

Full Name (Last, First, Middle Initial)

**B.** Reginald Sterrett

Mailing Address 105 E 177th St

City  
Bronx

State  
NY

Zip Code  
10453-5913

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8494**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Lorraine Stucky

Mailing Address 603 Jay Street, Apt. C1

City  
Utica

State  
NY

Zip Code  
13501

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9450**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.82

**SUBTOTAL** of Disbursements This Page (optional) .....

163.38

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 248 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Erin Sulyma

Mailing Address 369 Sandoris Circle

City Rochester State NY Zip Code 14622

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8357

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

80.25

Full Name (Last, First, Middle Initial)

**B.** Erin Sulyma

Mailing Address 369 Sandoris Circle

City Rochester State NY Zip Code 14622

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8601

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C.** Jason Takahashi

Mailing Address 2945 S. Gaylord Street

City Denver State CO Zip Code 80210

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9727

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

27.56

**SUBTOTAL** of Disbursements This Page (optional) .....

137.81

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 249 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Jason Takahashi

Mailing Address 2945 S. Gaylord Street

City State Zip Code  
Denver CO 80210

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9782**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

93.69

Full Name (Last, First, Middle Initial)

**B.** Jason Takahashi

Mailing Address 2945 S. Gaylord Street

City State Zip Code  
Denver CO 80210

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9544**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

74.40

Full Name (Last, First, Middle Initial)

**C.** Jason Takahashi

Mailing Address 2945 S. Gaylord Street

City State Zip Code  
Denver CO 80210

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9656**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

**SUBTOTAL** of Disbursements This Page (optional) .....

234.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 250 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Elaine Taylor

Mailing Address 1656 Dr. MLK, Jr. Blvd.  
#3RN

City State Zip Code  
Bronx NY 10453

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8499**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Melvin Taylor

Mailing Address 10511 Ditmars Blvd

City State Zip Code  
East Elmhurst NY 11369-1634

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8518**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** The Associates

Mailing Address 2-4 Nevins Street

City State Zip Code  
Brooklyn NY 11217

Purpose of Disbursement  
GOTV Staging Site

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9057**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 251 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** The Shop Consulting, Inc.

Mailing Address 100 S. Baldwin Street, Suite 205

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Voter File Development Non-Cand. Spec.-V

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8554

Date of Disbursement

11 / 03 / 2006

Amount of Each Disbursement this Period

-27905.48

Void Prior Period Check

Full Name (Last, First, Middle Initial)

**B.** Carrie Theobald

Mailing Address 92 Eastern Avenue

City Ballston Spa State NY Zip Code 12020

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9452

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

99.20

Full Name (Last, First, Middle Initial)

**C.** Brenda Thomas

Mailing Address 18939 113th Rd

City Saint Albans State NY Zip Code 11412-2405

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8527

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

-27706.28

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 252 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Shawanna Thomas

Mailing Address 1603 E. Fayette Street

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8602

Date of Disbursement

MM / DD / YYYY  
11 / 06 / 2006

Amount of Each Disbursement this Period

77.50

Full Name (Last, First, Middle Initial)

**B.** Marcia Thompson

Mailing Address 19419 115th Dr

City Saint Albans State NY Zip Code 11412-2705

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8514

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Holianne Timmerman

Mailing Address 105 W. North Street, Apt. 2

City Ballston Spa State NY Zip Code 12020

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9729

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2006

Amount of Each Disbursement this Period

146.70

**SUBTOTAL** of Disbursements This Page (optional) .....

324.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 253 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Holianne Timmerman

Mailing Address 105 W. North Street, Apt. 2

City State Zip Code  
 Ballston Spa NY 12020

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9454

Date of Disbursement

/   /

Amount of Each Disbursement this Period

210.96

Full Name (Last, First, Middle Initial)

**B.** Holianne Timmerman

Mailing Address 105 W. North Street, Apt. 2

City State Zip Code  
 Ballston Spa NY 12020

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9546

Date of Disbursement

/   /

Amount of Each Disbursement this Period

63.38

Full Name (Last, First, Middle Initial)

**C.** Stephen Torcoletti

Mailing Address P.O. Box 14522

City State Zip Code  
 Colonie NY 12205

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9548

Date of Disbursement

/   /

Amount of Each Disbursement this Period

112.99

**SUBTOTAL** of Disbursements This Page (optional) .....

387.33

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 254 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Stephen Torcoletti

Mailing Address P.O. Box 14522

City  
Colonie

State  
NY

Zip Code  
12205

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D9658

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**B.** Maria Torres

Mailing Address 597 E 139th St  
APT 6N

City  
Bronx

State  
NY

Zip Code  
10454-2328

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D8509

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Joseph Tourville

Mailing Address 277 Ushers Rd.

City  
Clifton Park

State  
NY

Zip Code  
12065

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D9254

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.31

**SUBTOTAL** of Disbursements This Page (optional) .....

196.44

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 255 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Joseph Tourville

Mailing Address 277 Ushers Rd.

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9456

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

109.66

Full Name (Last, First, Middle Initial)

**B.** Joseph Tourville

Mailing Address 277 Ushers Rd.

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8978

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

17.50

Full Name (Last, First, Middle Initial)

**C.** Joseph Tourville

Mailing Address 277 Ushers Rd.

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9550

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

129.42

**SUBTOTAL** of Disbursements This Page (optional) .....

256.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 256 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Joseph Tourville

Mailing Address 277 Ushers Rd.

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9660

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.42

Full Name (Last, First, Middle Initial)

**B.** Michelle Tracy

Mailing Address 1462 Levanna Rd.

City Union Springs State NY Zip Code 13160

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9061

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C.** Michelle Tracy

Mailing Address 1462 Levanna Rd.

City Union Springs State NY Zip Code 13160

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9059

Date of Disbursement

/   /

Amount of Each Disbursement this Period

28.00

**SUBTOTAL** of Disbursements This Page (optional) .....

177.42

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 257 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Patricia Tratt

Mailing Address 7124 Fosterville Rd.

City Port Byron State NY Zip Code 13140

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9256

Date of Disbursement

/   /

Amount of Each Disbursement this Period

88.58

Full Name (Last, First, Middle Initial)

**B.** Patricia Tratt

Mailing Address 7124 Fosterville Rd.

City Port Byron State NY Zip Code 13140

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9458

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.89

Full Name (Last, First, Middle Initial)

**C.** Patricia Tratt

Mailing Address 7124 Fosterville Rd.

City Port Byron State NY Zip Code 13140

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9554

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

272.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 258 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Patricia Tratt

Mailing Address 7124 Fosterville Rd.

City State Zip Code  
Port Byron NY 13140

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D9662

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

122.68

Full Name (Last, First, Middle Initial)

**B.** James Tucker

Mailing Address 95 Old Broadway

City State Zip Code  
New York NY 10027-7912

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D8472

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 7 / 2 0 0 6

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Christopher Tupper

Mailing Address 123 Jersey Field Rd.

City State Zip Code  
Little Falls NY 13365

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D9784

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 1 / 2 0 0 6

Amount of Each Disbursement this Period

101.96

**SUBTOTAL** of Disbursements This Page (optional) .....

324.64

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 259 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Christopher Tupper

Mailing Address 123 Jersey Field Rd.

City  
Little Falls

State  
NY

Zip Code  
13365

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D8959**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.69

Full Name (Last, First, Middle Initial)

**B.** Christopher Tupper

Mailing Address 123 Jersey Field Rd.

City  
Little Falls

State  
NY

Zip Code  
13365

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D9552**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.42

Full Name (Last, First, Middle Initial)

**C.** Christopher Tupper

Mailing Address 123 Jersey Field Rd.

City  
Little Falls

State  
NY

Zip Code  
13365

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D9664**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.42

**SUBTOTAL** of Disbursements This Page (optional) .....

269.53

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 260 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Daniel Ulloa

Mailing Address 100 Irving Avenue,  
Box 464

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8296**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

67.50

Full Name (Last, First, Middle Initial)

**B.** Daniel Ulloa

Mailing Address 100 Irving Avenue,  
Box 464

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8360**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

102.50

Full Name (Last, First, Middle Initial)

**C.** Daniel Ulloa

Mailing Address 100 Irving Avenue,  
Box 464

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8603**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

90.00

**SUBTOTAL** of Disbursements This Page (optional) .....

260.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 261 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. US Postmaster**

Mailing Address 30 Karner Rd.

City Albany State NY Zip Code 12288-9998

Purpose of Disbursement  
Exempt Mail-Oppose Sweeney

Candidate Name  
Kirsten Gillibrand

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 20

Transaction ID: D8265

Date of Disbursement

10 / 20 / 2006

Amount of Each Disbursement this Period

13000.00

Full Name (Last, First, Middle Initial)

## **B. US Postmaster**

Mailing Address 30 Karner Rd.

City Albany State NY Zip Code 12288-9998

Purpose of Disbursement  
Exempt Mail-Oppose Sweeney

Candidate Name  
Kirsten Gillibrand

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 20

Transaction ID: D8323

Date of Disbursement

10 / 28 / 2006

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

## **C. US Postmaster**

Mailing Address 30 Karner Rd.

City Albany State NY Zip Code 12288-9998

Purpose of Disbursement  
Exempt Mail-Arcuri

Candidate Name  
Michael A. Arcuri

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 24

Transaction ID: D8322

Date of Disbursement

10 / 28 / 2006

Amount of Each Disbursement this Period

10200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

29200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 262 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. US Postmaster**

Mailing Address 30 Karner Rd.

City Albany State NY Zip Code 12288-9998

Purpose of Disbursement  
Exempt Mail-Maffei

Candidate Name  
Dan Maffei

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 25

Transaction ID: D8321

Date of Disbursement

10 / 28 / 2006

Amount of Each Disbursement this Period

10875.00

Full Name (Last, First, Middle Initial)

## **B. US Postmaster**

Mailing Address 30 Karner Rd.

City Albany State NY Zip Code 12288-9998

Purpose of Disbursement  
GOTV Mailing-Generic

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9703

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

## **C. US Postmaster**

Mailing Address 30 Karner Rd.

City Albany State NY Zip Code 12288-9998

Purpose of Disbursement  
Exempt Mail-Gillibrand

Candidate Name  
Kirsten Gillibrand

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 20

Transaction ID: D8918

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

6000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

31875.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 263 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. US Postmaster**

Mailing Address 30 Karner Rd.

City Albany State NY Zip Code 12288-9998

Purpose of Disbursement  
Exempt Mail-Massa

Candidate Name  
Eric Massa

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 29

Transaction ID: D8923

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

9000.00

Full Name (Last, First, Middle Initial)

## **B. US Postmaster**

Mailing Address 30 Karner Rd.

City Albany State NY Zip Code 12288-9998

Purpose of Disbursement  
Vendor Refund--Exempt Mail-Gillibrand

Candidate Name  
Kirsten Gillibrand

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 20

Transaction ID: D9374

Date of Disbursement

11 / 22 / 2006

Amount of Each Disbursement this Period

-5579.85

Full Name (Last, First, Middle Initial)

## **C. Rosario Valenti**

Mailing Address 312 Arlington Avenue

City Syracuse State NY Zip Code 13207

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8604

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

127.50

**SUBTOTAL** of Disbursements This Page (optional) .....

3547.65

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 264 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Peter Van Grier

Mailing Address 16317 130th Ave  
APT 8A

City State Zip Code  
Jamaica NY 11434-3065

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8526**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Albert Vance

Mailing Address 138 West Street

City State Zip Code  
Whitesboro NY 13492

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9786**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

68.89

Full Name (Last, First, Middle Initial)

**C.** Albert Vance

Mailing Address 138 West Street

City State Zip Code  
Whitesboro NY 13492

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9040**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.33

**SUBTOTAL** of Disbursements This Page (optional) .....

179.22

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 265 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Albert Vance

Mailing Address 138 West Street

City  
Whitesboro

State  
NY

Zip Code  
13492

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9556

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Albert Vance

Mailing Address 138 West Street

City  
Whitesboro

State  
NY

Zip Code  
13492

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9666

Date of Disbursement

/   /

Amount of Each Disbursement this Period

99.20

Full Name (Last, First, Middle Initial)

**C.** Sally Vance

Mailing Address 138 West Street

City  
Whitesboro

State  
NY

Zip Code  
13492

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D9460

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.82

**SUBTOTAL** of Disbursements This Page (optional) .....

168.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 266 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Sally Vance

Mailing Address 138 West Street

City Whitesboro State NY Zip Code 13492

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9558**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**B.** Sally Vance

Mailing Address 138 West Street

City Whitesboro State NY Zip Code 13492

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9668**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

99.20

Full Name (Last, First, Middle Initial)

**C.** Luke M. Vaughn

Mailing Address 3899 Oneida Street

City New Hartford State NY Zip Code 13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9291**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1582.01

**SUBTOTAL** of Disbursements This Page (optional) .....

1714.28

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 267 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Luke M. Vaughn

Mailing Address 3899 Oneida Street

City New Hartford State NY Zip Code 13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9461

Date of Disbursement

/   /

Amount of Each Disbursement this Period

462.11

Full Name (Last, First, Middle Initial)

**B.** Luke M. Vaughn

Mailing Address 3899 Oneida Street

City New Hartford State NY Zip Code 13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9559

Date of Disbursement

/   /

Amount of Each Disbursement this Period

462.11

Full Name (Last, First, Middle Initial)

**C.** Luke M. Vaughn

Mailing Address 3899 Oneida Street

City New Hartford State NY Zip Code 13413

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9669

Date of Disbursement

/   /

Amount of Each Disbursement this Period

462.11

**SUBTOTAL** of Disbursements This Page (optional) .....

1386.33

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 268 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Linnette Velez

Mailing Address 2430 Creston Ave  
#163

City State Zip Code  
Bronx NY 10467-6762

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9137

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** Linnette Velez

Mailing Address 2430 Creston Ave  
#163

City State Zip Code  
Bronx NY 10467-6762

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8415

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**C.** Verizon

Mailing Address P.O. Box 15124

City State Zip Code  
Albany NY 12212-5124

Purpose of Disbursement  
Voter ID Phone Bank Non-Cand. Specific

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9874

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1075.16

**SUBTOTAL** of Disbursements This Page (optional) .....

2075.16

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 269 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Verizon

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement  
Voter ID Phone Bank Non-Cand. Specific

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9866**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

450.08

Full Name (Last, First, Middle Initial)

**B.** Verizon

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement  
Voter ID Phone Bank Non-Cand. Specific

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9706**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.04

Full Name (Last, First, Middle Initial)

**C.** Verizon

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement  
Voter ID Phone Bank Non-Cand. Specific

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9872**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

393.33

**SUBTOTAL** of Disbursements This Page (optional) .....

909.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 270 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Daniel Vollweiler

Mailing Address 268 Broadway, Apt. 8

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D9258

Date of Disbursement

/   /

Amount of Each Disbursement this Period

88.18

Full Name (Last, First, Middle Initial)

**B.** W. B. Mason Company Inc.

Mailing Address P.O. Box 111,  
59 Centre Street

City State Zip Code  
Brockton MA 02303

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D9082

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1539.18

Full Name (Last, First, Middle Initial)

**C.** Michael Walsh

Mailing Address 50 Lyndon Rd.

City State Zip Code  
Whitesboro NY 13492

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D9671

Date of Disbursement

/   /

Amount of Each Disbursement this Period

22.04

**SUBTOTAL** of Disbursements This Page (optional) .....

1649.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 271 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Michael Walsh

Mailing Address 50 Lyndon Rd.

City  
Whitesboro

State  
NY

Zip Code  
13492

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9675**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**B.** Daz Watson

Mailing Address 190 W 135th St

City  
New York

State  
NY

Zip Code  
10030-2902

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8444**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**C.** Dirk Watson

Mailing Address 81 Genesee Street, Apt. 3B-5

City  
Auburn

State  
NY

Zip Code  
13021

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9465**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

**SUBTOTAL** of Disbursements This Page (optional) .....

299.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 272 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Emily Wheeler

Mailing Address 915 West Main Street

City Kent State OH Zip Code 44240

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9260

Date of Disbursement

/   /

Amount of Each Disbursement this Period

59.12

Full Name (Last, First, Middle Initial)

**B.** Emily Wheeler

Mailing Address 915 West Main Street

City Kent State OH Zip Code 44240

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9788

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.03

Full Name (Last, First, Middle Initial)

**C.** Emily Wheeler

Mailing Address 915 West Main Street

City Kent State OH Zip Code 44240

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9906

Date of Disbursement

/   /

Amount of Each Disbursement this Period

73.85

**SUBTOTAL** of Disbursements This Page (optional) .....

197.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 273 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Emily Wheeler

Mailing Address 915 West Main Street

City State Zip Code  
Kent OH 44240

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9673

Date of Disbursement

/   /

Amount of Each Disbursement this Period

122.68

Full Name (Last, First, Middle Initial)

**B.** Paul Widzowski

Mailing Address 54 Squire Ln

City State Zip Code  
Clifton Park NY 12065

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9467

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.07

Full Name (Last, First, Middle Initial)

**C.** Paul Widzowski

Mailing Address 54 Squire Ln

City State Zip Code  
Clifton Park NY 12065

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9843

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.07

**SUBTOTAL** of Disbursements This Page (optional) .....

250.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 274 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Paul Widzowski

Mailing Address 54 Squire Ln

City  
Clifton Park

State  
NY

Zip Code  
12065

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9677**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

132.38

Full Name (Last, First, Middle Initial)

**B.** Christopher Wilcox

Mailing Address 75 Maple Street

City  
Oneonta

State  
NY

Zip Code  
13820

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9261**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1508.70

Full Name (Last, First, Middle Initial)

**C.** Christopher Wilcox

Mailing Address 75 Maple Street

City  
Oneonta

State  
NY

Zip Code  
13820

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9468**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

453.98

**SUBTOTAL** of Disbursements This Page (optional) .....

2095.06

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 275 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Christopher Wilcox

Mailing Address 75 Maple Street

City Oneonta State NY Zip Code 13820

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9560

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 8 / 2 0 0 6

Amount of Each Disbursement this Period

462.11

Full Name (Last, First, Middle Initial)

**B.** Christopher Wilcox

Mailing Address 75 Maple Street

City Oneonta State NY Zip Code 13820

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9678

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

462.11

Full Name (Last, First, Middle Initial)

**C.** Herbert Williams

Mailing Address 190 W 135th St

City New York State NY Zip Code 10030-2902

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8440

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 7 / 2 0 0 6

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1024.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 276 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Marri Williams**

Mailing Address 138 E. Brighton Avenue

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8613**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**B. Monifa Williams**

Mailing Address 1950 E Tremont Ave  
APT 4B

City Bronx State NY Zip Code 10462-5608

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8435**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Pharoah Williams**

Mailing Address 1295 5th Ave  
APT 5D

City NEW YORK State NY Zip Code 10029-3129

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D9133**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 277 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Pharoah Williams

Mailing Address 1295 5th Ave  
APT 5D

City NEW YORK State NY Zip Code 10029-3129

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8412

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 07 / 2006

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**B.** Shaleea Williams

Mailing Address 113 Berwyn Avenue

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8605

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 06 / 2006

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

**C.** Sharena Williams

Mailing Address 3150 Broadway

City New York State NY Zip Code 10027-4135

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8467

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

870.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 278 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Kaleb Wilson

Mailing Address Cazenovia College,  
Box 2053

City Cazenovia State NY Zip Code 13035

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8297**

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

77.50

Full Name (Last, First, Middle Initial)

**B.** Kaleb Wilson

Mailing Address Cazenovia College,  
Box 2053

City Cazenovia State NY Zip Code 13035

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8356**

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C.** Kaleb Wilson

Mailing Address Cazenovia College,  
Box 2053

City Cazenovia State NY Zip Code 13035

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8606**

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

25.00

**SUBTOTAL** of Disbursements This Page (optional) .....

132.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 279 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. Winning Connections Inc.**

Mailing Address 317 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Voter ID Calls

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8996

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 2 / 2 0 0 6

Amount of Each Disbursement this Period

14865.00

Full Name (Last, First, Middle Initial)

## **B. Winning Connections Inc.**

Mailing Address 317 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Phone Calls-Generic

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9055

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 6 / 2 0 0 6

Amount of Each Disbursement this Period

44105.00

Full Name (Last, First, Middle Initial)

## **C. Frank Woidzik**

Mailing Address 13872 Locust Street, #E

City Westminster State CA Zip Code 92683

Purpose of Disbursement

Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9562

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 8 / 2 0 0 6

Amount of Each Disbursement this Period

66.13

**SUBTOTAL** of Disbursements This Page (optional) .....

59036.13

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 280 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Frank Woidzik

Mailing Address 13872 Locust Street, #E

City State Zip Code  
Westminster CA 92683

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9680**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

132.38

Full Name (Last, First, Middle Initial)

**B.** John Wokcikiewicz

Mailing Address 4872 Hyde Rd.

City State Zip Code  
Manlius NY 13104

Purpose of Disbursement  
Voter ID Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8607**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

**C.** Bryan Woliner

Mailing Address 9 Cloverleaf Drive

City State Zip Code  
Ballston Lake NY 12019

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9030**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

31.38

**SUBTOTAL** of Disbursements This Page (optional) .....

203.76

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 281 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Bryan Woliner

Mailing Address 9 Cloverleaf Drive

City State Zip Code  
 Ballston Lake NY 12019

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9564

Date of Disbursement

/   /

Amount of Each Disbursement this Period

99.20

Full Name (Last, First, Middle Initial)

**B.** Bryan Woliner

Mailing Address 9 Cloverleaf Drive

City State Zip Code  
 Ballston Lake NY 12019

Purpose of Disbursement  
 Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9682

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**C.** Jonathan Wright

Mailing Address 81 Prospect Street

City State Zip Code  
 New Paltz NY 12561

Purpose of Disbursement  
 GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9683

Date of Disbursement

/   /

Amount of Each Disbursement this Period

539.78

**SUBTOTAL** of Disbursements This Page (optional) .....

705.11

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 282 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Katrina Yeldon

Mailing Address 6939 Magpie Lane

City Tully State NY Zip Code 13159

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9569

Date of Disbursement

11 / 08 / 2006

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**B.** Anthony Zapata

Mailing Address 44 Jackson St  
APT 5B

City New York State NY Zip Code 10002-6638

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8477

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Anthony Zapata, Jr.

Mailing Address 44 Jackson St  
APT 5B

City New York State NY Zip Code 10002-6638

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8478

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 283 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Lolita Zayas

Mailing Address 14 Newell Street

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9470

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.82

Full Name (Last, First, Middle Initial)

**B.** Lolita Zayas

Mailing Address 14 Newell Street

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8957

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9.10

Full Name (Last, First, Middle Initial)

**C.** Lolita Zayas

Mailing Address 14 Newell Street

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9036

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9.63

**SUBTOTAL** of Disbursements This Page (optional) .....

54.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 284 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Lolita Zayas

Mailing Address 14 Newell Street

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9566**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.13

Full Name (Last, First, Middle Initial)

**B.** Lolita Zayas

Mailing Address 14 Newell Street

City State Zip Code  
Utica NY 13502

Purpose of Disbursement  
Persuasion Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9685**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.42

Full Name (Last, First, Middle Initial)

**C.** Alex Zwerdling

Mailing Address 420 Main Street

City State Zip Code  
Beacon NY 12508

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9686**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

893.07

**SUBTOTAL** of Disbursements This Page (optional) .....

1088.62

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 285 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Caroline Griffin

Mailing Address 96 South Swan Street

City Albany State NY Zip Code 12210

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8725**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

211.09

Full Name (Last, First, Middle Initial)

**B.** Clarion Hotel

Mailing Address 102 Lafayette Street

City Utica State NY Zip Code 13502

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8727**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

122.09

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Caroline Griffin

Mailing Address 96 South Swan Street

City Albany State NY Zip Code 12210

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8726**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

89.00

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

211.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 286 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Christopher Wilcox

Mailing Address 75 Maple Street

City State Zip Code  
 Oneonta NY 13820

Purpose of Disbursement  
 Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8972

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 2 / 2 0 0 6

Amount of Each Disbursement this Period

882.03

Full Name (Last, First, Middle Initial)

**B.** Cams New York Pizzeria

Mailing Address 476 Exchange Street

City State Zip Code  
 Geneva NY 14456

Purpose of Disbursement  
 Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8974

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 2 / 2 0 0 6

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Days Inn - Auburn

Mailing Address 37 William Street

City State Zip Code  
 Auburn NY 13021

Purpose of Disbursement  
 Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8973

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 2 / 2 0 0 6

Amount of Each Disbursement this Period

60.99

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

882.03

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 287 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. Verizon Wireless**

Mailing Address P.O. Box 15062

City Albany State NY Zip Code 12212-5062

Purpose of Disbursement

Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8975

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

79.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Christopher Wilcox**

Mailing Address 75 Maple Street

City Oneonta State NY Zip Code 13820

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8976

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

701.05

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Lisa Oelfke**

Mailing Address 404 Gair Street

City Piermont State NY Zip Code 10968

Purpose of Disbursement

Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9006

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

14.66

**SUBTOTAL** of Disbursements This Page (optional) .....

14.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 288 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. Cobble Pond Farms**

Mailing Address 1527 Crescent Rd.

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement  
Canvassing Travel/Gas

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9012

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Stewart's Shop**

Mailing Address PO Box 435

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Canvassing Travel/Gas

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9011

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.66

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Stewart's Shop**

Mailing Address PO Box 435

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Canvassing Travel/Gas

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9010

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 289 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Rebekah Patnode

Mailing Address 119 Lockes Village Rd.

City State Zip Code  
Wendell MA 01379

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9016**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19.08

Full Name (Last, First, Middle Initial)

**B.** Exxon Mobil

Mailing Address 1181 Western Avenue

City State Zip Code  
Albany NY 12203

Purpose of Disbursement  
Canvassing Travel/Gas

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9017**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Staples

Mailing Address 3035 Route 50

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Canvassing Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9018**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9.08

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

19.08

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 290 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** David Danielson

Mailing Address 9 Mountain Street

City Plainfield State MA Zip Code 01070

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9024

Date of Disbursement

/   /

Amount of Each Disbursement this Period

45.83

Full Name (Last, First, Middle Initial)

**B.** David Danielson

Mailing Address 9 Mountain Street

City Plainfield State MA Zip Code 01070

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9025

Date of Disbursement

/   /

Amount of Each Disbursement this Period

38.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Soave Faire Art & Office Supplies

Mailing Address 449 Broadway

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement  
Canvassing Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9026

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7.43

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

45.83

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 291 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Scott Shalett

Mailing Address 2120 L Street, NW, Suite 305

City  
Washington

State  
DC

Zip Code  
20037

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9063**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1018.59

Full Name (Last, First, Middle Initial)

**B.** Creekview Restaurant

Mailing Address 5629 Main Street

City  
Williamsville

State  
NY

Zip Code  
14221

Purpose of Disbursement  
GOTV Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9064**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

36.87

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Eckerd

Mailing Address 8530 Transit Rd.

City  
Buffalo

State  
NY

Zip Code  
14221

Purpose of Disbursement  
GOTV Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D9066**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.86

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

1018.59

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 292 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. Office Max**

Mailing Address 4101 Transit Rd.

City State Zip Code  
 Williamsville NY 14221

Purpose of Disbursement  
 GOTV Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9073

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

322.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Starbucks Coffee Company**

Mailing Address 8250 Transit Rd.

City State Zip Code  
 Williamsville NY 14221

Purpose of Disbursement  
 Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9067

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

15.79

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Target**

Mailing Address 8290 Transit Rd.

City State Zip Code  
 Buffalo NY 14221

Purpose of Disbursement  
 GOTV Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9072

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

136.61

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 293 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. Target**

Mailing Address 8290 Transit Rd.

City Buffalo State NY Zip Code 14221

Purpose of Disbursement  
GOTV Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9065

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

180.36

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Tim Hortons**

Mailing Address 7860 Transit Rd.

City Williamsville State NY Zip Code 14221

Purpose of Disbursement  
Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9068

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

60.76

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Valu Home Center**

Mailing Address 5433 Transit Rd.

City Williamsville State NY Zip Code 14221

Purpose of Disbursement  
GOTV Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9069

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

124.75

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 294 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Wegmans**

Mailing Address 8270 Transit Rd.

City State Zip Code  
 Williamsville NY 14221

Purpose of Disbursement  
 GOTV Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9071

Date of Disbursement

/   /

Amount of Each Disbursement this Period

55.77

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Wegmans**

Mailing Address 8270 Transit Rd.

City State Zip Code  
 Williamsville NY 14221

Purpose of Disbursement  
 GOTV Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9070

Date of Disbursement

/   /

Amount of Each Disbursement this Period

80.18

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. David Georges**

Mailing Address 38 Park Street, Unit 5A

City State Zip Code  
 Florham Park NJ 07932

Purpose of Disbursement  
 Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9085

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1050.15

**SUBTOTAL** of Disbursements This Page (optional) .....

1050.15

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 295 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

## **A. Avis Rent A Car**

Mailing Address 5900 Airport Rd.

City Oriskany State NY Zip Code 13424

Purpose of Disbursement

Car Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9086

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

581.56

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Target**

Mailing Address 1 Sangertown Square, Suite 3

City New Hartford State NY Zip Code 13413

Purpose of Disbursement

Canvassing Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9087

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

468.59

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Andrew Tyler**

Mailing Address 5396 Rice Rd.

City Trumansburg State NY Zip Code 14886

Purpose of Disbursement

Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9088

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

572.73

**SUBTOTAL** of Disbursements This Page (optional) .....

572.73

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 296 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Staples

Mailing Address 744 South Meadow Street

City Ithaca State NY Zip Code 14850

Purpose of Disbursement  
Canvassing Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9091

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

36.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Staples

Mailing Address 744 South Meadow Street

City Ithaca State NY Zip Code 14850

Purpose of Disbursement  
Canvassing Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9090

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

37.78

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Andrew Tyler

Mailing Address 5396 Rice Rd.

City Trumansburg State NY Zip Code 14886

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9089

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

498.25

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 297 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Christopher Wilcox

Mailing Address 75 Maple Street

City State Zip Code  
 Oneonta NY 13820

Purpose of Disbursement  
 Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9092

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

1272.73

Full Name (Last, First, Middle Initial)

**B.** Auburn Family Restaurant

Mailing Address 161 Genesee Street

City State Zip Code  
 Auburn NY 13021

Purpose of Disbursement  
 Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9099

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

32.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Cams New York Pizzeria

Mailing Address 476 Exchange Street

City State Zip Code  
 Geneva NY 14456

Purpose of Disbursement  
 Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9094

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

21.25

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

1272.73

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 298 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Daddabbo's Pizza

Mailing Address 105 Genesee Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9095

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

37.19

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Daddabbo's Pizza

Mailing Address 105 Genesee Street

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9100

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

78.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Radisson Hotel Utica Center

Mailing Address 200 Genesee Street

City Utica State NY Zip Code 13502

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9102

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

140.76

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 299 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 6980 Grant Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9097

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

167.82

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Wegmans**

Mailing Address 1 Loop Rd.

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9098

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Wegmans**

Mailing Address 1 Loop Rd.

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D9101

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

222.15

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 300 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Wegmans

Mailing Address 1 Loop Rd.

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9096

Date of Disbursement

/   /

Amount of Each Disbursement this Period

104.85

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Wegmans

Mailing Address 1 Loop Rd.

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9093

Date of Disbursement

/   /

Amount of Each Disbursement this Period

17.71

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Christopher Wilcox

Mailing Address 75 Maple Street

City Oneonta State NY Zip Code 13820

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9116

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.25

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 301 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Cynthia A. German

Mailing Address 27 Broadway Terrace  
Apt. 1D

City New York State NY Zip Code 10040-4714

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9103

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 15 / 2006

Amount of Each Disbursement this Period

505.26

Full Name (Last, First, Middle Initial)

**B.** The Home Depot

Mailing Address 40 West 23rd Street

City New York State NY Zip Code 10010

Purpose of Disbursement  
Canvassing Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9104

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 15 / 2006

Amount of Each Disbursement this Period

505.26

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Liam Fitzsimmons

Mailing Address 1538 Mt. Eagle Place

City Alexandria State VA Zip Code 22302

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9109

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 20 / 2006

Amount of Each Disbursement this Period

490.86

**SUBTOTAL** of Disbursements This Page (optional) .....

996.12

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 302 / 585

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Liam Fitzsimmons

Mailing Address 1538 Mt. Eagle Place

City Alexandria State VA Zip Code 22302

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9115

Date of Disbursement

11 / 20 / 2006

Amount of Each Disbursement this Period

371.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Pizza Aroma

Mailing Address 128 S Cayuga Street

City Ithaca State NY Zip Code 14850

Purpose of Disbursement

Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9111

Date of Disbursement

11 / 20 / 2006

Amount of Each Disbursement this Period

44.82

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Pizza Aroma

Mailing Address 128 S Cayuga Street

City Ithaca State NY Zip Code 14850

Purpose of Disbursement

Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9112

Date of Disbursement

11 / 20 / 2006

Amount of Each Disbursement this Period

30.78

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 303 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Pizza Aroma

Mailing Address 128 S Cayuga Street

City Ithaca State NY Zip Code 14850

Purpose of Disbursement  
Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9113

Date of Disbursement

/   /

Amount of Each Disbursement this Period

14.31

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Pizza Aroma

Mailing Address 128 S Cayuga Street

City Ithaca State NY Zip Code 14850

Purpose of Disbursement  
Meetings/Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9110

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8.37

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Staples

Mailing Address 744 South Meadow Street

City Ithaca State NY Zip Code 14850

Purpose of Disbursement  
Canvassing Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9114

Date of Disbursement

/   /

Amount of Each Disbursement this Period

21.58

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 304 / 585

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A.** Edgar R. Santana

Mailing Address 1438 Glover Street

City State Zip Code  
Bronx NY 10462

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9698

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 0 / 2 6 / 2 0 0 6

Amount of Each Disbursement this Period

1548.95

Full Name (Last, First, Middle Initial)

**B.** Let's Park Corp

Mailing Address 119 E 28th Street

City State Zip Code  
New York NY 10016

Purpose of Disbursement  
Parking Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9699

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 0 / 2 6 / 2 0 0 6

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Metropolitan Transit Authority

Mailing Address 330 Jay Street

City State Zip Code  
Brooklyn NY 10023

Purpose of Disbursement  
Metrocards

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9700

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 0 / 2 6 / 2 0 0 6

Amount of Each Disbursement this Period

1518.95

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

1548.95

**TOTAL** This Period (last page this line number only) .....

785362.88



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 305 / 585

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Urbach Kahn & WerlinNature of Debt (Purpose):  
Accounting Services

Mailing Address 250 Park Avenue South

City State ZIP Code  
New York NY 10003

Outstanding Balance Beginning This Period

19073.50

Transaction ID: D1363

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19073.50

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Zale Koff Graphics, Inc.Nature of Debt (Purpose):  
Printing

Mailing Address 225 Varick Street, 4th Floor

City State ZIP Code  
New York NY 10014

Outstanding Balance Beginning This Period

24613.55

Transaction ID: D1365

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24613.55

1) **SUBTOTALS** This Period This Page (optional).....

43687.05

2) **TOTALS** This Period (last page this line number only).....

43687.05

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 306 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee LSG Strategies, LLC				Purpose of Expenditure Vendor Credit-Persuasion ID & GOTV Calls		<input type="text"/> Category/Type	
Mailing Address 2120 L Street, NW Suite 305				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 15 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">-15469.90</div>	
City Washington DC		State: NY					
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential District: 26					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div> <div style="text-align: right;">Transaction ID: D9710</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee LSG Strategies, LLC				Purpose of Expenditure Persuasion ID Calls		<input type="text"/> Category/Type	
Mailing Address 2120 L Street, NW Suite 305				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>10 / 25 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5226.22</div>	
City Washington DC		State: NY					
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential District: 26					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div> <div style="text-align: right;">Transaction ID: D9190</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee LSG Strategies, LLC				Purpose of Expenditure Persuasion ID & GOTV Calls		<input type="text"/> Category/Type	
Mailing Address 2120 L Street, NW Suite 305				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 06 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">47639.94</div>	
City Washington DC		State: NY					
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential District: 26					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div> <div style="text-align: right;">Transaction ID: D9709</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; padding: 2px; text-align: right;">37396.26</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ►			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 307 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			Full Name of Subordinate Committee		
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE			Mailing Address		
			City		State
			ZIP Code		

  

Full Name (Last, First, Middle Initial) of Each Payee LSG Strategies, LLC				Purpose of Expenditure Persuasion ID Ca- lls		<input type="text"/> Category/Type
Mailing Address 2120 L Street, NW						
City Washington				State DC		ZIP Code 20037
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26		
Aggregate General Election Expenditure for this Candidate ▶				59610.84		
				Transaction ID: D9191		
Full Name (Last, First, Middle Initial) of Each Payee Michael MacDonald				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type
Mailing Address 1918 Baker Avenue						
City Utica				State NY		ZIP Code 13501
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24		
Aggregate General Election Expenditure for this Candidate ▶				53725.38		
				Transaction ID: D9359		
Full Name (Last, First, Middle Initial) of Each Payee Michael MacDonald				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type
Mailing Address 1918 Baker Avenue						
City Utica				State NY		ZIP Code 13501
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24		
Aggregate General Election Expenditure for this Candidate ▶				53725.38		
				Transaction ID: D9521		

  

SUBTOTAL of Expenditures This Page (optional) .....		14052.41
TOTAL This Period (last page this line number only) .....		















**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 314 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Full Name of Subordinate Committee  Mailing Address  City _____ State _____ ZIP Code _____

  

Full Name (Last, First, Middle Initial) of Each Payee Burton Phillips		Purpose of Expenditure Persuasion Canva-ssing	<input type="text"/> Category/Type
Mailing Address 194 Ashland Avenue Buffalo, NY 14222		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 07 / 2006</div> </div>	
City Buffalo	State NY	ZIP Code 14222	Amount 80.00
Name of Federal Candidate Supported Jack Davis	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 26	<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)
Aggregate General Election Expenditure for this Candidate ► 59610.84		Transaction ID: D9159	

  

Full Name (Last, First, Middle Initial) of Each Payee Burton Phillips		Purpose of Expenditure Persuasion Canva-ssing	<input type="text"/> Category/Type
Mailing Address 194 Ashland Avenue Buffalo, NY 14222		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 14 / 2006</div> </div>	
City Buffalo	State NY	ZIP Code 14222	Amount 60.00
Name of Federal Candidate Supported Jack Davis	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 26	<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)
Aggregate General Election Expenditure for this Candidate ► 59610.84		Transaction ID: D9318	

  

Full Name (Last, First, Middle Initial) of Each Payee Chris Flien		Purpose of Expenditure Persuasion Canva-ssing	<input type="text"/> Category/Type
Mailing Address 86 Markus Drive Cheektowaga, NY 14228		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 07 / 2006</div> </div>	
City Cheektowaga	State NY	ZIP Code 14228	Amount 80.00
Name of Federal Candidate Supported Jack Davis	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 26	<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)
Aggregate General Election Expenditure for this Candidate ► 59610.84		Transaction ID: D9151	

  

SUBTOTAL of Expenditures This Page (optional) .....	220.00
TOTAL This Period (last page this line number only) .....	





**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 317 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee Corey Damon				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 216 Culpepper _____ Williamsville, NY 14221				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 7 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">60.00</div>	
City _____ State _____ ZIP Code _____ Williamsville NY 14221							
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 26					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div> <div style="text-align: right;">Transaction ID: D9167</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Corey Mohr				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 19 Hodge Apts _____ Buffalo, NY 14222				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 4 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">135.00</div>	
City _____ State _____ ZIP Code _____ Buffalo NY 14222							
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 26					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div> <div style="text-align: right;">Transaction ID: D9320</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Corey Mohr				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 19 Hodge Apts _____ Buffalo, NY 14222				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 7 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">120.00</div>	
City _____ State _____ ZIP Code _____ Buffalo NY 14222							
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 26					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div> <div style="text-align: right;">Transaction ID: D9166</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">315.00</div>	
TOTAL This Period (last page this line number only) .....			













**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 323 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Jim Higgins				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 1411 Ruie Rd N Tonawanda, NY 14120				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 4 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">105.00</div>	
City State ZIP Code N Tonawanda NY 14120							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 26							
Jack Davis				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div>					
Transaction ID: D9389							

  

Full Name (Last, First, Middle Initial) of Each Payee Jim Hufnagel				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 225 Ontario Street Wilson, NY 14172				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 7 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">80.00</div>	
City State ZIP Code Wilson NY 14172							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 26							
Jack Davis				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div>					
Transaction ID: D9149							

  

Full Name (Last, First, Middle Initial) of Each Payee John Mullane				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 93 Lindhurst Drive Lockport, NY 14094				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 7 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">80.00</div>	
City State ZIP Code Lockport NY 14094							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 26							
Jack Davis				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div>					
Transaction ID: D9148							

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">265.00</div>	
TOTAL This Period (last page this line number only) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 324 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			Full Name of Subordinate Committee		
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE			Mailing Address		
			City		State
			ZIP Code		

  

Full Name (Last, First, Middle Initial) of Each Payee John Sullivan				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 277 Lisbon Avenue Buffalo, NY 14215				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 7 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">122.50</div>	
City Buffalo		State NY					
ZIP Code 14215							
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div>				Transaction ID: D9162			

  

Full Name (Last, First, Middle Initial) of Each Payee John Wacek				Purpose of Expenditure Persuasive Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 6142 Clarence Lane North E Amherst, NY 14051				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 4 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">40.00</div>	
City E Amherst		State NY					
ZIP Code 14051							
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div>				Transaction ID: D9322			

  

Full Name (Last, First, Middle Initial) of Each Payee Jonathan Burdette				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 3047 Ewings Rd Newfane, NY 14108				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 4 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">80.00</div>	
City Newfane		State NY					
ZIP Code 14108							
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div>				Transaction ID: D9401			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; padding: 2px; text-align: right;">242.50</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ►			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 325 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Full Name of Subordinate Committee  Mailing Address  City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee Josh Durkin				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 44 Center Drive Depew, NY 14043				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>1 1 / 1 4 / 2 0 0 6</div> </div>	
City Depew		State NY		ZIP Code 14043	
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: center;">59610.84</div> <div style="text-align: center;">Transaction ID: D9423</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">80.00</div> <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

Full Name (Last, First, Middle Initial) of Each Payee Justin Muench				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 92 Kurtz Ave Lancaster, NY 14086				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>1 1 / 1 4 / 2 0 0 6</div> </div>	
City Lancaster		State NY		ZIP Code 14086	
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: center;">59610.84</div> <div style="text-align: center;">Transaction ID: D9367</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">120.00</div> <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

Full Name (Last, First, Middle Initial) of Each Payee Katelynn Symanski				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 61 Country Pl. Lancaster, NY 14086				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>1 1 / 1 4 / 2 0 0 6</div> </div>	
City Lancaster		State NY		ZIP Code 14086	
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: center;">59610.84</div> <div style="text-align: center;">Transaction ID: D9378</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">120.00</div> <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; width: 150px; text-align: center;">320.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ►		













**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 331 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Megan Gill				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type																					
Mailing Address 126 South Prince Dr.      Depew, NY 14043				Date <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">1</td> <td style="text-align: center;">4</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">6</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	0	6
M	M	/	D					D	/	Y	Y	Y	Y														
1	1		1					4		2	0	0	6														
City      State      ZIP Code Depew      NY      14043																											
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26		Amount 120.00																					
Aggregate General Election Expenditure for this Candidate ► 59610.84				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																							
Transaction ID: D9382																											

  

Full Name (Last, First, Middle Initial) of Each Payee Mike Forster				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type																					
Mailing Address 153 Halston Parkway      East Amherst, NY 14051				Date <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">0</td> <td style="text-align: center;">7</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">6</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	7		2	0	0	6
M	M	/	D					D	/	Y	Y	Y	Y														
1	1		0					7		2	0	0	6														
City      State      ZIP Code East Amherst      NY      14051																											
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26		Amount 60.00																					
Aggregate General Election Expenditure for this Candidate ► 59610.84				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																							
Transaction ID: D9168																											

  

Full Name (Last, First, Middle Initial) of Each Payee Mike T. Jufer				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type																					
Mailing Address 5357 Subbera      N Tonawanda, NY 14120				Date <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">1</td> <td style="text-align: center;">4</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">6</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	0	6
M	M	/	D					D	/	Y	Y	Y	Y														
1	1		1					4		2	0	0	6														
City      State      ZIP Code N Tonawanda      NY      14120																											
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26		Amount 120.00																					
Aggregate General Election Expenditure for this Candidate ► 59610.84				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																							
Transaction ID: D9394																											

  

SUBTOTAL of Expenditures This Page (optional) .....		300.00	
TOTAL This Period (last page this line number only) .....			













**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 337 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:		Full Name of Subordinate Committee	
		Mailing Address	
		City	State      ZIP Code

  

Full Name (Last, First, Middle Initial) of Each Payee PAYCHEX				Purpose of Expenditure Payroll Taxes/Wi- thholdings		<input type="checkbox"/> Category/Type	
Mailing Address 1551 S. Washington Ave.,      P.O. Box 1180				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">921.06</div>	
City      State      ZIP Code							
Piscataway      NJ      08854							
Name of Federal Candidate Supported		Office Sought: <input checked="" type="checkbox"/> House    State: NY		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">921.06</div>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Eric Massa		Senate    District: 29					
		Presidential					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">12480.60</div>				Transaction ID: D9882			

  

Full Name (Last, First, Middle Initial) of Each Payee PAYCHEX				Purpose of Expenditure Payroll Taxes/Wi- thholdings		<input type="checkbox"/> Category/Type	
Mailing Address 1551 S. Washington Ave.,      P.O. Box 1180				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>1 0 / 2 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">388.17</div>	
City      State      ZIP Code							
Piscataway      NJ      08854							
Name of Federal Candidate Supported		Office Sought: <input checked="" type="checkbox"/> House    State: NY		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">388.17</div>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Michael A. Arcuri		Senate    District: 24					
		Presidential					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div>				Transaction ID: D9877			

  

Full Name (Last, First, Middle Initial) of Each Payee PAYCHEX				Purpose of Expenditure Payroll Taxes/Wi- thholdings		<input type="checkbox"/> Category/Type	
Mailing Address 1551 S. Washington Ave.,      P.O. Box 1180				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>1 0 / 2 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">388.78</div>	
City      State      ZIP Code							
Piscataway      NJ      08854							
Name of Federal Candidate Supported		Office Sought: <input checked="" type="checkbox"/> House    State: NY		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">388.78</div>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Kirsten Gillibrand		Senate    District: 20					
		Presidential					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>				Transaction ID: D9878			

  

SUBTOTAL of Expenditures This Page (optional) .....		1698.01	
TOTAL This Period (last page this line number only) .....			







FEC Schedule F (Form 3X) Rev. 02/2003

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 342 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address
		City State ZIP Code

  

Full Name (Last, First, Middle Initial) of Each Payee Stephanie Molnar				Purpose of Expenditure Persuasion Canva- ssing		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type
Mailing Address 852 Pioneer Drive North Tonawanda, NY 14120						
City North Tonawanda		State NY		ZIP Code 14120		Date M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26		Amount <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto; text-align: right;">62.50</div>
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto; text-align: right;">59610.84</div>				Transaction ID: D9170		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)

  

Full Name (Last, First, Middle Initial) of Each Payee Terry Gaffney				Purpose of Expenditure Persuasion Canva- ssing		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type
Mailing Address 424 Brookshire Rd Youngstown, NY 14174						
City Youngstown		State NY		ZIP Code 14174		Date M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 26		Amount <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto; text-align: right;">80.00</div>
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto; text-align: right;">59610.84</div>				Transaction ID: D9402		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)

  

Full Name (Last, First, Middle Initial) of Each Payee Timothy P. Barber				Purpose of Expenditure Persuasion Canva- ssing		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type
Mailing Address 63 South Street Auburn, NY 13021						
City Auburn		State NY		ZIP Code 13021		Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24		Amount <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto; text-align: right;">122.68</div>
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto; text-align: right;">53725.38</div>				Transaction ID: D9579		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto; text-align: right;">265.18</div>
TOTAL This Period (last page this line number only) .....		



**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 344 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Tom Gerken				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type			
Mailing Address 39 Henderson Pl      Hamburg, NY 14075				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 7 / 2 0 0 6</div> </div>					
City Hamburg		State NY						ZIP Code 14075	
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: NY    District: 26	
Aggregate General Election Expenditure for this Candidate ► <span style="border: 1px solid black; padding: 2px 20px;">59610.84</span> <div style="text-align: right;">Transaction ID: D9144</div>				Amount <div style="border: 1px solid black; padding: 2px 20px;">80.00</div>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Tom Gerken				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type			
Mailing Address 39 Henderson Pl      Hamburg, NY 14075				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 4 / 2 0 0 6</div> </div>					
City Hamburg		State NY						ZIP Code 14075	
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: NY    District: 26	
Aggregate General Election Expenditure for this Candidate ► <span style="border: 1px solid black; padding: 2px 20px;">59610.84</span> <div style="text-align: right;">Transaction ID: D9363</div>				Amount <div style="border: 1px solid black; padding: 2px 20px;">80.00</div>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Vinnie Terranova				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type			
Mailing Address 560 Lake Ave      Lancaster, NY 14086				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 4 / 2 0 0 6</div> </div>					
City Lancaster		State NY						ZIP Code 14086	
Name of Federal Candidate Supported Jack Davis		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: NY    District: 26	
Aggregate General Election Expenditure for this Candidate ► <span style="border: 1px solid black; padding: 2px 20px;">59610.84</span> <div style="text-align: right;">Transaction ID: D9381</div>				Amount <div style="border: 1px solid black; padding: 2px 20px;">120.00</div>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; padding: 2px 20px;">280.00</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ►			













**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 350 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Yelena Kolova				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type			
Mailing Address 2662 E. 26th Street, Apt. 3B      Brooklyn, NY 11235				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 01 / 2006</div> </div>					
City Brooklyn		State NY						ZIP Code 11235	
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: NY    District: 20	
Aggregate General Election Expenditure for this Candidate ► <span style="border: 1px solid black; padding: 2px 20px;">61752.08</span>				Amount <div style="border: 1px solid black; text-align: right; padding: 2px 20px;">126.36</div>					
Transaction ID: D9350				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Adem Arifaj				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type			
Mailing Address 20 Wood Street      Garfield, NJ 07026				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 01 / 2006</div> </div>					
City Garfield		State NJ						ZIP Code 07026	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: NY    District: 24	
Aggregate General Election Expenditure for this Candidate ► <span style="border: 1px solid black; padding: 2px 20px;">53725.38</span>				Amount <div style="border: 1px solid black; text-align: right; padding: 2px 20px;">717.17</div>					
Transaction ID: D9264				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Adem Arifaj				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type			
Mailing Address 20 Wood Street      Garfield, NJ 07026				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 08 / 2006</div> </div>					
City Garfield		State NJ						ZIP Code 07026	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: NY    District: 24	
Aggregate General Election Expenditure for this Candidate ► <span style="border: 1px solid black; padding: 2px 20px;">53725.38</span>				Amount <div style="border: 1px solid black; text-align: right; padding: 2px 20px;">379.28</div>					
Transaction ID: D9791				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; text-align: right; padding: 2px 20px;">1222.81</div>	
TOTAL This Period (last page this line number only) .....			



**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 352 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Ashley O'Brian				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type			
Mailing Address 4532 Route 38A      Skaneateles, NY 13152				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>					
City Skaneateles		State NY						ZIP Code 13152	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px 20px;">53725.38</div>				Amount <div style="border: 1px solid black; padding: 2px 20px;">66.13</div>					
Transaction ID: D9417				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Ashley O'Brian				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type			
Mailing Address 4532 Route 38A      Skaneateles, NY 13152				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 8 / 2 0 0 6</div> </div>					
City Skaneateles		State NY						ZIP Code 13152	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px 20px;">53725.38</div>				Amount <div style="border: 1px solid black; padding: 2px 20px;">109.72</div>					
Transaction ID: D9527				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Ashley O'Brian				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type			
Mailing Address 4532 Route 38A      Skaneateles, NY 13152				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 6</div> </div>					
City Skaneateles		State NY						ZIP Code 13152	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px 20px;">53725.38</div>				Amount <div style="border: 1px solid black; padding: 2px 20px;">98.70</div>					
Transaction ID: D9637				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; padding: 2px 20px;">274.55</div>	
TOTAL This Period (last page this line number only) .....		<div style="border: 1px solid black; padding: 2px 20px;"></div>	





**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 354 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Carine Adams				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 1973 Emerson Rd. Port Byron, NY 13140				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 08 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">66.13</div>	
City Port Byron NY 13140		<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 08 / 2006</div> </div>					
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 24					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9471</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Carine Adams				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 1973 Emerson Rd. Port Byron, NY 13140				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 15 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">132.37</div>	
City Port Byron NY 13140		<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 15 / 2006</div> </div>					
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 24					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9570</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Carlas Sledge				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 23 Barber Street, #4 Auburn, NY 13021				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 01 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">66.13</div>	
City Auburn NY 13021		<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 01 / 2006</div> </div>					
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 24					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9447</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; padding: 2px; text-align: right;">264.63</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ►			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 355 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Chris Flierl				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 86 Markus Drive Cheektowaga, NY 14228				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 4 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">60.00</div>	
City State ZIP Code Cheektowaga NY 14228							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Jack Davis State: NY District: 26							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">59610.84</div> <div style="text-align: right;">Transaction ID: D9319</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Daniel Vollweiler				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 268 Broadway, Apt. 8 Saratoga Springs, NY 12866				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">88.18</div>	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <div style="text-align: right;">Transaction ID: D9257</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee David Danielson				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 9 Mountain Street Plainfield, MA 01070				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">161.01</div>	
City State ZIP Code Plainfield MA 01070							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <div style="text-align: right;">Transaction ID: D9210</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

SUBTOTAL of Expenditures This Page (optional) .....		309.19	
TOTAL This Period (last page this line number only) .....			

















**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 363 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Frank Woidzik				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 13872 Locust Street, #E      Westminster, CA 92683				Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
City Westminster		State CA		ZIP Code 92683	
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: center;">61752.08</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">132.38</div>	
Transaction ID: D9679				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

Full Name (Last, First, Middle Initial) of Each Payee Frank Woidzik				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 13872 Locust Street, #E      Westminster, CA 92683				Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
City Westminster		State CA		ZIP Code 92683	
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: center;">61752.08</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">66.13</div>	
Transaction ID: D9561				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

Full Name (Last, First, Middle Initial) of Each Payee Geraldyn Frank				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 916 Eagle Street      Utica, NY 13501				Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
City Utica		State NY		ZIP Code 13501	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: center;">53725.38</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">160.08</div>	
Transaction ID: D9740				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

SUBTOTAL of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; width: 150px; text-align: center;">358.59</div>
TOTAL This Period (last page this line number only) ..... ►		





**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 366 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Heather Lockhart				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 45 Robinwood Drive Clifton Park, NY 12065				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>1 0 / 2 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>	
City State ZIP Code Clifton Park NY 12065							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <div style="text-align: right;">Transaction ID: D9243</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Heather Lockhart				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 45 Robinwood Drive Clifton Park, NY 12065				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>	
City State ZIP Code Clifton Park NY 12065							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <div style="text-align: right;">Transaction ID: D9353</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Heather Simon				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 815 N. Broadway Saratoga Springs, NY 12866				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>1 1 / 1 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <div style="text-align: right;">Transaction ID: D9650</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

SUBTOTAL of Expenditures This Page (optional) .....		99.21	
TOTAL This Period (last page this line number only) .....			



**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 368 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address
		City State ZIP Code

  

Full Name (Last, First, Middle Initial) of Each Payee Irhad Rascic				Purpose of Expenditure Persuasion Canva- ssing		Category/Type
Mailing Address 14 Colonial Drive New Hartford, NY 13413				<div style="border: 1px solid black; padding: 2px;">Date</div> <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">M M 1 1</div> <div style="text-align: center;">/</div> <div style="text-align: center;">D D 1 5</div> <div style="text-align: center;">/</div> <div style="text-align: center;">Y Y Y Y 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px;">122.68</div>
City State ZIP Code New Hartford NY 13413		Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24				
Name of Federal Candidate Supported Michael A. Arcuri		Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px;">53725.38</div> Transaction ID: D9641				
Full Name (Last, First, Middle Initial) of Each Payee Irhad Rascic				Purpose of Expenditure Persuasion Canva- ssing		Category/Type
Mailing Address 14 Colonial Drive New Hartford, NY 13413				<div style="border: 1px solid black; padding: 2px;">Date</div> <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">M M 1 1</div> <div style="text-align: center;">/</div> <div style="text-align: center;">D D 0 8</div> <div style="text-align: center;">/</div> <div style="text-align: center;">Y Y Y Y 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px;">33.07</div>
City State ZIP Code New Hartford NY 13413		Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24				
Name of Federal Candidate Supported Michael A. Arcuri		Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px;">53725.38</div> Transaction ID: D9533				
Full Name (Last, First, Middle Initial) of Each Payee Irhad Rascic				Purpose of Expenditure Persuasion Canva- ssing		Category/Type
Mailing Address 14 Colonial Drive New Hartford, NY 13413				<div style="border: 1px solid black; padding: 2px;">Date</div> <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">M M 1 1</div> <div style="text-align: center;">/</div> <div style="text-align: center;">D D 0 1</div> <div style="text-align: center;">/</div> <div style="text-align: center;">Y Y Y Y 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px;">66.48</div>
City State ZIP Code New Hartford NY 13413		Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24				
Name of Federal Candidate Supported Michael A. Arcuri		Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px;">53725.38</div> Transaction ID: D9435				
<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">222.23</div>						
<b>TOTAL</b> This Period (last page this line number only) ..... ▶						





**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 370 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Jared Gonya				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 128 S. Fulton Street Auburn, NY 13021				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">132.38</div>	
City State ZIP Code Auburn NY 13021							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24							
Michael A. Arcuri				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div>					
Transaction ID: D9331							

  

Full Name (Last, First, Middle Initial) of Each Payee Jared Sagendorf				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 104 Pershing Avenue Wynantskill, NY 12198				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 8 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>	
City State ZIP Code Wynantskill NY 12198							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24							
Michael A. Arcuri				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div>					
Transaction ID: D9537							

  

Full Name (Last, First, Middle Initial) of Each Payee Jason Takahashi				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 2945 S. Gaylord Street Denver, CO 80210				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 8 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">74.40</div>	
City State ZIP Code Denver CO 80210							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20							
Kirsten Gillibrand				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>					
Transaction ID: D9543							

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">239.85</div>	
TOTAL This Period (last page this line number only) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	















**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 377 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee Lindsay A. Hilton				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 24 Lawton Avenue Auburn, NY 13021					
City Auburn		State NY		ZIP Code 13021	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 8 / 2 0 0 6</div> </div>	
		State: NY District: 24		Amount <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">73.84</div>	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D9813</b>					

  

Full Name (Last, First, Middle Initial) of Each Payee Lindsay A. Hilton				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 24 Lawton Avenue Auburn, NY 13021					
City Auburn		State NY		ZIP Code 13021	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>	
		State: NY District: 24		Amount <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">186.71</div>	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D9746</b>					

  

Full Name (Last, First, Middle Initial) of Each Payee Lindsay A. Hilton				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 24 Lawton Avenue Auburn, NY 13021					
City Auburn		State NY		ZIP Code 13021	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 6</div> </div>	
		State: NY District: 24		Amount <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">33.07</div>	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D9224</b>					

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">293.62</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ►		

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 378 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Lisa Oelfke				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 404 Gair Street Piermont, NY 10968				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">219.97</div>	
City State ZIP Code Piermont NY 10968		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <div style="text-align: right;">Transaction ID: D9245</div>							

  

Full Name (Last, First, Middle Initial) of Each Payee Lisa Oelfke				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 404 Gair Street Piermont, NY 10968				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">368.84</div>	
City State ZIP Code Piermont NY 10968		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <div style="text-align: right;">Transaction ID: D9420</div>							

  

Full Name (Last, First, Middle Initial) of Each Payee Lisa Oelfke				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 404 Gair Street Piermont, NY 10968				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 8 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">219.97</div>	
City State ZIP Code Piermont NY 10968		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <div style="text-align: right;">Transaction ID: D9529</div>							

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">808.78</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

















**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 386 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Nicholas Sinagra				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: 5px;">Category/Type</div>	
Mailing Address 9 S. Frank Street, Apt. O      Saratoga Springs, NY 12866				Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
City Saratoga Springs		State NY		ZIP Code 12866	
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: center;">61752.08</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">11.02</div>	
Transaction ID: D9445				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

Full Name (Last, First, Middle Initial) of Each Payee Nick Pizzariello				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: 5px;">Category/Type</div>	
Mailing Address 1302 Enclave Circle      Nashville, TN 37211				Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
City Nashville		State TN		ZIP Code 37211	
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: center;">61752.08</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">147.16</div>	
Transaction ID: D9429				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

Full Name (Last, First, Middle Initial) of Each Payee Pamela Brewer				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: 5px;">Category/Type</div>	
Mailing Address 101 Meadowbrook Rd.      Short Hills, NJ 07078				Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6	
City Short Hills		State NJ		ZIP Code 07078	
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: center;">61752.08</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">33.07</div>	
Transaction ID: D9206				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 150px; text-align: center;">191.25</div>
TOTAL This Period (last page this line number only) .....		





**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 389 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address
		City State ZIP Code

  

Full Name (Last, First, Middle Initial) of Each Payee Patricia Tratt		Purpose of Expenditure Persuasion Canva-ssing	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type
Mailing Address 7124 Fosterville Rd. Port Byron, NY 13140		Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
City Port Byron	State NY	ZIP Code 13140	
Name of Federal Candidate Supported Michael A. Arcuri	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 24	Amount <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">150.89</div>
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">53725.38</div>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D9457			

  

Full Name (Last, First, Middle Initial) of Each Payee Patricia Tratt		Purpose of Expenditure Persuasion Canva-ssing	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type
Mailing Address 7124 Fosterville Rd. Port Byron, NY 13140		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6	
City Port Byron	State NY	ZIP Code 13140	
Name of Federal Candidate Supported Michael A. Arcuri	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 24	Amount <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">88.58</div>
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">53725.38</div>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D9255			

  

Full Name (Last, First, Middle Initial) of Each Payee Rameshwar Padmanabhan		Purpose of Expenditure Wages	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type
Mailing Address 50 Copperwoods Pittsford, NY 14534		Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
City Pittsford	State NY	ZIP Code 14534	
Name of Federal Candidate Supported Eric Massa	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 29	Amount <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">630.45</div>
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">12480.60</div>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D8392			

  

SUBTOTAL of Expenditures This Page (optional) .....	<div style="border: 1px solid black; width: 150px; text-align: right; padding: 2px;">869.92</div>
TOTAL This Period (last page this line number only) .....	

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 390 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:		Full Name of Subordinate Committee	
		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Rameshwar Padmanabhan				Purpose of Expenditure Wages		<input type="checkbox"/> Category/Type	
Mailing Address 50 Copperwoods Pittsford, NY 14534				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">235.79</div>	
City State ZIP Code Pittsford NY 14534		Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House State: NY <div style="display: flex; justify-content: space-between;"> <div></div> <div>Senate District: 29</div> </div>					
Eric Massa		<input type="checkbox"/> Presidential					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">12480.60</div> <b>Transaction ID: D8698</b>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Rebekah Patnode				Purpose of Expenditure Persuasion Canva-ssing		<input type="checkbox"/> Category/Type	
Mailing Address 119 Lockes Village Rd. Wendell, MA 01379				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 8 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">382.92</div>	
City State ZIP Code Wendell MA 01379		Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House State: NY <div style="display: flex; justify-content: space-between;"> <div></div> <div>Senate District: 20</div> </div>					
Kirsten Gillibrand		<input type="checkbox"/> Presidential					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <b>Transaction ID: D9531</b>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Rebekah Patnode				Purpose of Expenditure Persuasion Canva-ssing		<input type="checkbox"/> Category/Type	
Mailing Address 119 Lockes Village Rd. Wendell, MA 01379				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">464.77</div>	
City State ZIP Code Wendell MA 01379		Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House State: NY <div style="display: flex; justify-content: space-between;"> <div></div> <div>Senate District: 20</div> </div>					
Kirsten Gillibrand		<input type="checkbox"/> Presidential					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <b>Transaction ID: D9424</b>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">1083.48</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 391 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address
		City State ZIP Code

  

Full Name (Last, First, Middle Initial) of Each Payee Richard Rodriguez				Purpose of Expenditure Persuasion Canva- ssing		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type	
Mailing Address 734 Brandywine Avenue Schenectady, NY 12308				Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6		Amount <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div> 46.84	
City State ZIP Code Schenectady NY 12308							
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div> 61752.08				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Transaction ID: D9831							

  

Full Name (Last, First, Middle Initial) of Each Payee Robert Jacobs				Purpose of Expenditure Persuasion Canva- ssing		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type	
Mailing Address 108 Hathorn Blvd. Saratoga Springs, NY 12866				Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6		Amount <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div> 60.62	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div> 61752.08				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Transaction ID: D9720							

  

Full Name (Last, First, Middle Initial) of Each Payee Robert Jacobs				Purpose of Expenditure Persuasion Canva- ssing		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type	
Mailing Address 108 Hathorn Blvd. Saratoga Springs, NY 12866				Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6		Amount <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div> 66.13	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div> 61752.08				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Transaction ID: D9344							

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div> 173.59
TOTAL This Period (last page this line number only) .....		

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 392 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Robert Jacobs				Purpose of Expenditure Mileage Reimbursement <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 108 Hathorn Blvd. Saratoga Springs, NY 12866					
City Saratoga Springs		State NY		ZIP Code 12866	
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">61752.08</div>				Date MM / DD / YYYY 11 / 06 / 2006	
Transaction ID: D9027				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">41.65</div>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Robert Jacobs				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 108 Hathorn Blvd. Saratoga Springs, NY 12866					
City Saratoga Springs		State NY		ZIP Code 12866	
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">61752.08</div>				Date MM / DD / YYYY 11 / 08 / 2006	
Transaction ID: D9511				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">99.20</div>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Robert Jacobs				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 108 Hathorn Blvd. Saratoga Springs, NY 12866					
City Saratoga Springs		State NY		ZIP Code 12866	
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">61752.08</div>				Date MM / DD / YYYY 11 / 15 / 2006	
Transaction ID: D9624				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">99.20</div>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 150px; text-align: center;">240.05</div>	
TOTAL This Period (last page this line number only) .....			







**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 395 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Scott Robinson				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 507 Park Avenue Medina, NY 14103				Date <div style="display: flex; justify-content: space-between;"> <div> M M 1 0 </div> <div> D D 3 1 </div> <div> Y Y Y Y 2 0 0 6 </div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">526.05</div>	
City State ZIP Code Medina NY 14103							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Michael A. Arcuri State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> Transaction ID: D9439				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Scott Robinson				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 507 Park Avenue Medina, NY 14103				Date <div style="display: flex; justify-content: space-between;"> <div> M M 1 1 </div> <div> D D 0 8 </div> <div> Y Y Y Y 2 0 0 6 </div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">354.06</div>	
City State ZIP Code Medina NY 14103							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Michael A. Arcuri State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> Transaction ID: D9829				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Scott Robinson				Purpose of Expenditure Mileage Reimburs-ement		<input type="text"/> Category/Type	
Mailing Address 507 Park Avenue Medina, NY 14103				Date <div style="display: flex; justify-content: space-between;"> <div> M M 1 1 </div> <div> D D 0 2 </div> <div> Y Y Y Y 2 0 0 6 </div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12.25</div>	
City State ZIP Code Medina NY 14103							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> Transaction ID: D8950				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">892.36</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			



**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 397 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Stephanie Scerbo				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 80 Route 423      Mechanicville, NY 12118				Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
City      State      ZIP Code Mechanicville      NY      12118		Name of Federal Candidate Supported Kirsten Gillibrand		Amount <div style="border: 1px solid black; width: 150px; text-align: right;">46.84</div>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 20		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right;">61752.08</div>				Transaction ID: D9835	

  

Full Name (Last, First, Middle Initial) of Each Payee Tim Hilton				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 40 Aurelius Avenue      Auburn, NY 13021				Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
City      State      ZIP Code Auburn      NY      13021		Name of Federal Candidate Supported Michael A. Arcuri		Amount <div style="border: 1px solid black; width: 150px; text-align: right;">129.42</div>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 24		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right;">53725.38</div>				Transaction ID: D9618	

  

Full Name (Last, First, Middle Initial) of Each Payee Tim Hilton				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 40 Aurelius Avenue      Auburn, NY 13021				Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
City      State      ZIP Code Auburn      NY      13021		Name of Federal Candidate Supported Michael A. Arcuri		Amount <div style="border: 1px solid black; width: 150px; text-align: right;">77.15</div>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 24		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right;">53725.38</div>				Transaction ID: D9507	

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 150px; text-align: right;">253.41</div>
TOTAL This Period (last page this line number only) .....		

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 398 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City	State ZIP Code

  

Full Name (Last, First, Middle Initial) of Each Payee Tim Hilton		Purpose of Expenditure Persuasion Canva- ssing	<input type="checkbox"/> Category/Type
Mailing Address 40 Aurelius Avenue Auburn, NY 13021			
City Auburn	State NY	ZIP Code 13021	Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Name of Federal Candidate Supported Michael A. Arcuri	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 24	Amount 129.42
Aggregate General Election Expenditure for this Candidate ▶ 53725.38		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D9338			

  

Full Name (Last, First, Middle Initial) of Each Payee Valerie Ryan		Purpose of Expenditure Persuasion Canva- ssing	<input type="checkbox"/> Category/Type
Mailing Address P.O. Box 383 Selkirk, NY 12158			
City Selkirk	State NY	ZIP Code 12158	Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 31.57
Aggregate General Election Expenditure for this Candidate ▶ 61752.08		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D9899			

  

Full Name (Last, First, Middle Initial) of Each Payee William H. O'Donovan		Purpose of Expenditure Persuasion Canva- ssing	<input type="checkbox"/> Category/Type
Mailing Address 32 Circular Street Lake Luzerne, NY 12846			
City Lake Luzerne	State NY	ZIP Code 12846	Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 93.68
Aggregate General Election Expenditure for this Candidate ▶ 61752.08		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D9764			

  

SUBTOTAL of Expenditures This Page (optional) .....		254.67
TOTAL This Period (last page this line number only) .....		



**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 400 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Abigail Bower				Purpose of Expenditure Mileage Reimbursement <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 32 Van Patten Street      Auburn, NY 13021				Date MM / DD / YYYY 11 / 16 / 2006	
City      State      ZIP Code Auburn      NY      13021		Amount <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">37.50</div>			
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D9107					

  

Full Name (Last, First, Middle Initial) of Each Payee Albert Vance				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 138 West Street      Whitesboro, NY 13492				Date MM / DD / YYYY 11 / 01 / 2006	
City      State      ZIP Code Whitesboro      NY      13492		Amount <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">68.88</div>			
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D9785					

  

Full Name (Last, First, Middle Initial) of Each Payee Albert Vance				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 138 West Street      Whitesboro, NY 13492				Date MM / DD / YYYY 11 / 15 / 2006	
City      State      ZIP Code Whitesboro      NY      13492		Amount <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">99.20</div>			
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D9665					

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">205.58</div>
TOTAL This Period (last page this line number only) .....		









**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 404 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee Carrie Theobald				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 92 Eastern Avenue Ballston Spa, NY 12020				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">99.20</div>	
City Ballston Spa		State NY					
ZIP Code 12020							
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>		Transaction ID: D9451			

  

Full Name (Last, First, Middle Initial) of Each Payee Cassandra Beal				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 7653 Kirkville Rd. Kirkville, NY 13082				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">275.86</div>	
City Kirkville		State NY					
ZIP Code 13082							
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div>		Transaction ID: D9274			

  

Full Name (Last, First, Middle Initial) of Each Payee Cassandra Beal				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 7653 Kirkville Rd. Kirkville, NY 13082				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">166.17</div>	
City Kirkville		State NY					
ZIP Code 13082							
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div>		Transaction ID: D9846			

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">541.23</div>	
TOTAL This Period (last page this line number only) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 405 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Cassandra Beal				Purpose of Expenditure Mileage Reimbursement <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: 5px;">Category/Type</div>	
Mailing Address 7653 Kirkville Rd. Kirkville, NY 13082					
City Kirkville		State NY		ZIP Code 13082	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">53725.38</div>				Date MM / DD / YYYY 11 / 06 / 2006	
Transaction ID: D9050				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">21.87</div>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Cassandra Beal				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: 5px;">Category/Type</div>	
Mailing Address 7653 Kirkville Rd. Kirkville, NY 13082					
City Kirkville		State NY		ZIP Code 13082	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">53725.38</div>				Date MM / DD / YYYY 10 / 25 / 2006	
Transaction ID: D9712				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">166.17</div>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Cassandra Beal				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: 5px;">Category/Type</div>	
Mailing Address 7653 Kirkville Rd. Kirkville, NY 13082					
City Kirkville		State NY		ZIP Code 13082	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">53725.38</div>				Date MM / DD / YYYY 11 / 08 / 2006	
Transaction ID: D9799				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">86.94</div>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 150px; text-align: center;">274.98</div>	
TOTAL This Period (last page this line number only) .....			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 406 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee Charles Allen				Purpose of Expenditure Persuasion Canva-ssing		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type	
Mailing Address 2465 Dublin Rd. Auburn, NY 13021				Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6		Amount <div style="border: 1px solid black; width: 150px; text-align: right; padding-right: 10px;">122.68</div>	
City Auburn State NY ZIP Code 13021		Name of Federal Candidate Supported					
Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right; padding-right: 10px;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Transaction ID: D9575							

  

Full Name (Last, First, Middle Initial) of Each Payee Charles Allen				Purpose of Expenditure Persuasion Canva-ssing		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type	
Mailing Address 2465 Dublin Rd. Auburn, NY 13021				Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6		Amount <div style="border: 1px solid black; width: 150px; text-align: right; padding-right: 10px;">64.02</div>	
City Auburn State NY ZIP Code 13021		Name of Federal Candidate Supported					
Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right; padding-right: 10px;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Transaction ID: D9789							

  

Full Name (Last, First, Middle Initial) of Each Payee Christine Nougaim				Purpose of Expenditure Persuasion Canva-ssing		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type	
Mailing Address 15 Spring Avenue Latham, NY 12110				Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6		Amount <div style="border: 1px solid black; width: 150px; text-align: right; padding-right: 10px;">33.07</div>	
City Latham State NY ZIP Code 12110		Name of Federal Candidate Supported					
Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right; padding-right: 10px;">61752.08</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Transaction ID: D9412							

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 150px; text-align: right; padding-right: 10px;">219.77</div>	
TOTAL This Period (last page this line number only) .....			



**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 408 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			Full Name of Subordinate Committee		
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE			Mailing Address		
			City		State
			ZIP Code		

  

Full Name (Last, First, Middle Initial) of Each Payee Christopher Broughton				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type
Mailing Address 6 Marinello Terrace Albany, NY 12209						
City Albany		State NY		ZIP Code 12209		
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20		
Aggregate General Election Expenditure for this Candidate ► 61752.08				Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6		
Transaction ID: D9481				Amount 66.13		
				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)		

  

Full Name (Last, First, Middle Initial) of Each Payee Christopher Hayden				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type
Mailing Address 199 Thimbleberry Rd. Ballston Spa, NY 12020						
City Ballston Spa		State NY		ZIP Code 12020		
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20		
Aggregate General Election Expenditure for this Candidate ► 61752.08				Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6		
Transaction ID: D9811				Amount 120.33		
				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)		

  

Full Name (Last, First, Middle Initial) of Each Payee Christopher Tupper				Purpose of Expenditure Mileage Reimburs-ement		<input type="text"/> Category/Type
Mailing Address 123 Jersey Field Rd. Little Falls, NY 13365						
City Little Falls		State NY		ZIP Code 13365		
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24		
Aggregate General Election Expenditure for this Candidate ► 53725.38				Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6		
Transaction ID: D8958				Amount 10.69		
				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)		

  

SUBTOTAL of Expenditures This Page (optional) ►		197.15
TOTAL This Period (last page this line number only) ►		



**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 409 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Christopher Tupper				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 123 Jersey Field Rd. Little Falls, NY 13365				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">101.95</div>	
City State ZIP Code Little Falls NY 13365							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Michael A. Arcuri State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9783</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Christopher Tupper				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 123 Jersey Field Rd. Little Falls, NY 13365				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 8 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">129.42</div>	
City State ZIP Code Little Falls NY 13365							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Michael A. Arcuri State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9551</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Christopher Tupper				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 123 Jersey Field Rd. Little Falls, NY 13365				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">129.42</div>	
City State ZIP Code Little Falls NY 13365							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Michael A. Arcuri State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9663</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">360.79</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 410 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Colleen Musa				Purpose of Expenditure Mileage Reimbursement <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 6 Golf Avenue New Hartford, NY 13413				Date MM / DD / YYYY 11 / 02 / 2006	
City New Hartford		State NY		ZIP Code 13413	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">53725.38</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">23.27</div>	
Transaction ID: D8962				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

Full Name (Last, First, Middle Initial) of Each Payee Colleen Musa				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 6 Golf Avenue New Hartford, NY 13413				Date MM / DD / YYYY 11 / 15 / 2006	
City New Hartford		State NY		ZIP Code 13413	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">53725.38</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">173.67</div>	
Transaction ID: D9860				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

Full Name (Last, First, Middle Initial) of Each Payee Colleen Musa				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 6 Golf Avenue New Hartford, NY 13413				Date MM / DD / YYYY 11 / 08 / 2006	
City New Hartford		State NY		ZIP Code 13413	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">53725.38</div>				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">173.67</div>	
Transaction ID: D9825				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 150px; text-align: center;">370.61</div>
TOTAL This Period (last page this line number only) .....		

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 411 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address
		City _____ State _____ ZIP Code _____

  

Full Name (Last, First, Middle Initial) of Each Payee Colleen Musa				Purpose of Expenditure Persuasion Canva-ssing		<input type="checkbox"/> Category/Type	
Mailing Address 6 Golf Avenue New Hartford, NY 13413				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">286.27</div>	
City New Hartford NY 13413		Name of Federal Candidate Supported Michael A. Arcuri					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <b>Transaction ID: D9760</b>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Colleen Musa				Purpose of Expenditure Mileage Reimburs-ement		<input type="checkbox"/> Category/Type	
Mailing Address 6 Golf Avenue New Hartford, NY 13413				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 2 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9.80</div>	
City New Hartford NY 13413		Name of Federal Candidate Supported Michael A. Arcuri					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <b>Transaction ID: D8952</b>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Colleen Musa				Purpose of Expenditure Persuasion Canva-ssing		<input type="checkbox"/> Category/Type	
Mailing Address 6 Golf Avenue New Hartford, NY 13413				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">286.27</div>	
City New Hartford NY 13413		Name of Federal Candidate Supported Michael A. Arcuri					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <b>Transaction ID: D9722</b>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; padding: 2px; text-align: right;">582.34</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ►		



**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 413 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Daniel Levine				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 4 Victoria Ln Saratoga Springs, NY 12866				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 15 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20							
Kirsten Gillibrand				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>					
		Transaction ID: D9628					

  

Full Name (Last, First, Middle Initial) of Each Payee Daniel Levine				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 4 Victoria Ln Saratoga Springs, NY 12866				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 01 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">64.02</div>	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20							
Kirsten Gillibrand				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>					
		Transaction ID: D9756					

  

Full Name (Last, First, Middle Initial) of Each Payee Daniel Quimby				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 191 Seymour Street, Apt. 3 Auburn, NY 13021				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 08 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">139.20</div>	
City State ZIP Code Auburn NY 13021							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24							
Michael A. Arcuri				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div>					
		Transaction ID: D9827					

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">236.29</div>	
TOTAL This Period (last page this line number only) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 414 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Daniel Quimby				Purpose of Expenditure Mileage Reimbursement <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 191 Seymour Street, Apt. 3      Auburn, NY 13021				Date MM / DD / YYYY 11 / 06 / 2006	
City      State      ZIP Code Auburn      NY      13021		Amount <div style="border: 1px solid black; width: 100%; text-align: right;">59.67</div>			
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 100%; text-align: right;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D9048</b>					

  

Full Name (Last, First, Middle Initial) of Each Payee Daniel Quimby				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 191 Seymour Street, Apt. 3      Auburn, NY 13021				Date MM / DD / YYYY 11 / 01 / 2006	
City      State      ZIP Code Auburn      NY      13021		Amount <div style="border: 1px solid black; width: 100%; text-align: right;">77.15</div>			
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 100%; text-align: right;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D9431</b>					

  

Full Name (Last, First, Middle Initial) of Each Payee Daniel Quimby				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 191 Seymour Street, Apt. 3      Auburn, NY 13021				Date MM / DD / YYYY 11 / 15 / 2006	
City      State      ZIP Code Auburn      NY      13021		Amount <div style="border: 1px solid black; width: 100%; text-align: right;">129.42</div>			
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 100%; text-align: right;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D9639</b>					

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 100%; text-align: right;">266.24</div>
TOTAL This Period (last page this line number only) .....		

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 415 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Deborah G. Crocker				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type																					
Mailing Address 131 Traver Rd.      Gansevoort, NY 12831				Date <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">0</td> <td style="text-align: center;">8</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">6</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	8		2	0	0	6
M	M	/	D					D	/	Y	Y	Y	Y														
1	1		0					8		2	0	0	6														
City      State      ZIP Code Gansevoort      NY      12831																											
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">44.09</div>																					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																							
Transaction ID: D9491																											

  

Full Name (Last, First, Middle Initial) of Each Payee Deborah G. Crocker				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type																					
Mailing Address 131 Traver Rd.      Gansevoort, NY 12831				Date <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">6</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	0	6
M	M	/	D					D	/	Y	Y	Y	Y														
1	1		0					1		2	0	0	6														
City      State      ZIP Code Gansevoort      NY      12831																											
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>																					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																							
Transaction ID: D9296																											

  

Full Name (Last, First, Middle Initial) of Each Payee Denise Brown				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type																					
Mailing Address 1107 City Street, #2      Utica, NY 13502				Date <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: none; padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">1</td> <td style="text-align: center;">5</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">6</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	5		2	0	0	6
M	M	/	D					D	/	Y	Y	Y	Y														
1	1		1					5		2	0	0	6														
City      State      ZIP Code Utica      NY      13502																											
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">132.38</div>																					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																							
Transaction ID: D9585																											

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">209.54</div>	
TOTAL This Period (last page this line number only) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	









**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 419 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Eric DeGrechie				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 107 Caroline Street, Apt. D Saratoga Springs, NY 12866				Date <div style="display: flex; justify-content: space-between;"> <div> M M 1 1 </div> <div>/</div> <div> D D 1 5 </div> <div>/</div> <div> Y Y Y Y 2 0 0 6 </div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">66.13</div>	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <div style="text-align: right;">Transaction ID: D9598</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Eric DeGrechie				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 107 Caroline Street, Apt. D Saratoga Springs, NY 12866				Date <div style="display: flex; justify-content: space-between;"> <div> M M 1 1 </div> <div>/</div> <div> D D 0 8 </div> <div>/</div> <div> Y Y Y Y 2 0 0 6 </div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">79.91</div>	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <div style="text-align: right;">Transaction ID: D9495</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Eric DeGrechie				Purpose of Expenditure Mileage Reimburs-ement		<input type="text"/> Category/Type	
Mailing Address 107 Caroline Street, Apt. D Saratoga Springs, NY 12866				Date <div style="display: flex; justify-content: space-between;"> <div> M M 1 1 </div> <div>/</div> <div> D D 0 6 </div> <div>/</div> <div> Y Y Y Y 2 0 0 6 </div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">28.87</div>	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Kirsten Gillibrand State: NY District: 20							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div> <div style="text-align: right;">Transaction ID: D9003</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">174.91</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			







**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 423 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Irving Gray				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 8436 South Street Rd. Port Byron, NY 13140				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">99.20</div>	
City Port Byron NY 13140		<div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 6</div> </div>					
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 24					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9220</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Irving Gray				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 8436 South Street Rd. Port Byron, NY 13140				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">312.54</div>	
City Port Byron NY 13140		<div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>					
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 24					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9744</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Irving Gray				Purpose of Expenditure Mileage Reimburs-ement		<input type="text"/> Category/Type	
Mailing Address 8436 South Street Rd. Port Byron, NY 13140				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 2 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">23.71</div>	
City Port Byron NY 13140		<div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 2 / 2 0 0 6</div> </div>					
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 24					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D8966</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">435.45</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			









**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 427 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee Jeffrey Holland				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type	
Mailing Address 27 Hampden DI _____ Utica, NY 13502				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">83.67</div>	
City _____ State _____ ZIP Code _____ Utica NY 13502							
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 24					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9852</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Jennifer Hibit				Purpose of Expenditure Wages		<input type="text"/> Category/Type	
Mailing Address 1016 Amherst Street, Apt. D5 _____ Buffalo, NY 14216				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1658.87</div>	
City _____ State _____ ZIP Code _____ Buffalo NY 14216							
Name of Federal Candidate Supported Dan Maffei		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 25					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">7075.71</div> <div style="text-align: right;">Transaction ID: D8387</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Jennifer Hibit				Purpose of Expenditure Wages		<input type="text"/> Category/Type	
Mailing Address 1016 Amherst Street, Apt. D5 _____ Buffalo, NY 14216				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">872.37</div>	
City _____ State _____ ZIP Code _____ Buffalo NY 14216							
Name of Federal Candidate Supported Dan Maffei		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 25					
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">7075.71</div> <div style="text-align: right;">Transaction ID: D8683</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

SUBTOTAL of Expenditures This Page (optional) .....		2614.91	
TOTAL This Period (last page this line number only) .....			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 428 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee John Ivinski				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 7553 Hamilton Rd. Hamilton, NY 13346				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">73.48</div>	
City State ZIP Code Hamilton NY 13346							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24							
Michael A. Arcuri							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div>							
Transaction ID: D9232							

  

Full Name (Last, First, Middle Initial) of Each Payee Jonnique Drewry				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 81 Genesee Street, Apt. 5C-1 Auburn, NY 13021				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>	
City State ZIP Code Auburn NY 13021							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24							
Michael A. Arcuri							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div>							
Transaction ID: D9306							

  

Full Name (Last, First, Middle Initial) of Each Payee Joseph Tourville				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 277 Ushers Rd. Clifton Park, NY 12065				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">30.31</div>	
City State ZIP Code Clifton Park NY 12065							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20							
Kirsten Gillibrand							
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>							
Transaction ID: D9253							

  

SUBTOTAL of Expenditures This Page (optional) .....		136.86	
TOTAL This Period (last page this line number only) .....			





**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 431 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee Kristina Clark				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type																			
Mailing Address 43 Westwood Drive Auburn, NY 13021				Date <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; text-align: center;">M</td> <td style="border: 1px solid black; text-align: center;">M</td> <td style="border: 1px solid black; text-align: center;">/</td> <td style="border: 1px solid black; text-align: center;">D</td> <td style="border: 1px solid black; text-align: center;">D</td> <td style="border: 1px solid black; text-align: center;">/</td> <td style="border: 1px solid black; text-align: center;">Y</td> <td style="border: 1px solid black; text-align: center;">Y</td> <td style="border: 1px solid black; text-align: center;">Y</td> <td style="border: 1px solid black; text-align: center;">Y</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">0</td> <td style="text-align: center;">8</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	8		2	0	0	6
M	M	/	D			D	/	Y	Y	Y	Y														
1	1		0			8		2	0	0	6														
City _____ State _____ ZIP Code _____ Auburn NY 13021																									
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24		Amount 66.13																			
Aggregate General Election Expenditure for this Candidate ► 53725.38				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																					
Transaction ID: D9485																									

  

Full Name (Last, First, Middle Initial) of Each Payee Kristina Clark				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type																			
Mailing Address 43 Westwood Drive Auburn, NY 13021				Date <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; text-align: center;">M</td> <td style="border: 1px solid black; text-align: center;">M</td> <td style="border: 1px solid black; text-align: center;">/</td> <td style="border: 1px solid black; text-align: center;">D</td> <td style="border: 1px solid black; text-align: center;">D</td> <td style="border: 1px solid black; text-align: center;">/</td> <td style="border: 1px solid black; text-align: center;">Y</td> <td style="border: 1px solid black; text-align: center;">Y</td> <td style="border: 1px solid black; text-align: center;">Y</td> <td style="border: 1px solid black; text-align: center;">Y</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	0	6
M	M	/	D			D	/	Y	Y	Y	Y														
1	1		0			1		2	0	0	6														
City _____ State _____ ZIP Code _____ Auburn NY 13021																									
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24		Amount 143.47																			
Aggregate General Election Expenditure for this Candidate ► 53725.38				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																					
Transaction ID: D9289																									

  

Full Name (Last, First, Middle Initial) of Each Payee Kristina Clark				Purpose of Expenditure Persuasion Canva- ssing		<input type="text"/> Category/Type																			
Mailing Address 43 Westwood Drive Auburn, NY 13021				Date <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; text-align: center;">M</td> <td style="border: 1px solid black; text-align: center;">M</td> <td style="border: 1px solid black; text-align: center;">/</td> <td style="border: 1px solid black; text-align: center;">D</td> <td style="border: 1px solid black; text-align: center;">D</td> <td style="border: 1px solid black; text-align: center;">/</td> <td style="border: 1px solid black; text-align: center;">Y</td> <td style="border: 1px solid black; text-align: center;">Y</td> <td style="border: 1px solid black; text-align: center;">Y</td> <td style="border: 1px solid black; text-align: center;">Y</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">1</td> <td style="text-align: center;">5</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	5		2	0	0	6
M	M	/	D			D	/	Y	Y	Y	Y														
1	1		1			5		2	0	0	6														
City _____ State _____ ZIP Code _____ Auburn NY 13021																									
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24		Amount 66.13																			
Aggregate General Election Expenditure for this Candidate ► 53725.38				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																					
Transaction ID: D9588																									

  

SUBTOTAL of Expenditures This Page (optional) ►		275.73	
TOTAL This Period (last page this line number only) ►			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 432 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee Lois Brazak				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 9 Steel Street Auburn, NY 13021				Date <div style="display: flex; justify-content: space-between;"> <div> M M 1 1 </div> <div> D D 0 1 </div> <div> Y Y Y Y 2 0 0 6 </div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>	
City Auburn State NY ZIP Code 13021							
Name of Federal Candidate Supported: Michael A. Arcuri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> Transaction ID: D9283				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Lolita Zayas				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 14 Newell Street Utica, NY 13502				Date <div style="display: flex; justify-content: space-between;"> <div> M M 1 1 </div> <div> D D 1 5 </div> <div> Y Y Y Y 2 0 0 6 </div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">129.42</div>	
City Utica State NY ZIP Code 13502							
Name of Federal Candidate Supported: Michael A. Arcuri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> Transaction ID: D9684				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Lolita Zayas				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 14 Newell Street Utica, NY 13502				Date <div style="display: flex; justify-content: space-between;"> <div> M M 1 1 </div> <div> D D 0 8 </div> <div> Y Y Y Y 2 0 0 6 </div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">66.13</div>	
City Utica State NY ZIP Code 13502							
Name of Federal Candidate Supported: Michael A. Arcuri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> Transaction ID: D9565				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; padding: 2px; text-align: right;">228.62</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ►			





**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 434 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee Martin Bower				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 32 Van Patten Street Auburn, NY 13021				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 9 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20.00</div>	
City Auburn State NY ZIP Code 13021							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Michael A. Arcuri State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9075</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Martin Bower				Purpose of Expenditure Mileage Reimburs-ement		<input type="text"/> Category/Type	
Mailing Address 32 Van Patten Street Auburn, NY 13021				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 9 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10.00</div>	
City Auburn State NY ZIP Code 13021							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Michael A. Arcuri State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9077</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Marvin Nelson				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 2611 Genesee Street, #3 North Utica, NY 13501				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 8 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">66.13</div>	
City Utica State NY ZIP Code 13501							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Michael A. Arcuri State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <div style="text-align: right;">Transaction ID: D9525</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; padding: 2px; text-align: right;">96.13</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ►			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 435 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Marvin Nelson				Purpose of Expenditure Persuasion Canva- ssing		<div style="border: 1px solid black; width: 100px; height: 20px;"></div> Category/Type	
Mailing Address 2611 Genesee Street, #3 North Utica, NY 13501				Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6		Amount <div style="border: 1px solid black; width: 150px; text-align: right;">132.38</div>	
City State ZIP Code Utica NY 13501		Name of Federal Candidate Supported Michael A. Arcuri					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: right;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Transaction ID: D9635							

  

Full Name (Last, First, Middle Initial) of Each Payee Marvin Nelson				Purpose of Expenditure Persuasion Canva- ssing		<div style="border: 1px solid black; width: 100px; height: 20px;"></div> Category/Type	
Mailing Address 2611 Genesee Street, #3 North Utica, NY 13501				Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6		Amount <div style="border: 1px solid black; width: 150px; text-align: right;">135.15</div>	
City State ZIP Code Utica NY 13501		Name of Federal Candidate Supported Michael A. Arcuri					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: right;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Transaction ID: D9762							

  

Full Name (Last, First, Middle Initial) of Each Payee Marvin Nelson				Purpose of Expenditure Mileage Reimburs- ement		<div style="border: 1px solid black; width: 100px; height: 20px;"></div> Category/Type	
Mailing Address 2611 Genesee Street, #3 North Utica, NY 13501				Date M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6		Amount <div style="border: 1px solid black; width: 150px; text-align: right;">31.15</div>	
City State ZIP Code Utica NY 13501		Name of Federal Candidate Supported Michael A. Arcuri					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24					
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: right;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Transaction ID: D9041							

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 150px; text-align: right;">298.68</div>	
TOTAL This Period (last page this line number only) .....			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 436 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Mary Simard				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 5688 Northshor Rd. Brantingham, NY 13312				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">55.11</div>	
City Brantingham		State NY					
ZIP Code 13312							
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY		District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <b>Transaction ID: D9249</b>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Mary Simard				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 5688 Northshor Rd. Brantingham, NY 13312				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">66.13</div>	
City Brantingham		State NY					
ZIP Code 13312							
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY		District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <b>Transaction ID: D9648</b>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Mary Simard				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 5688 Northshor Rd. Brantingham, NY 13312				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 8 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>	
City Brantingham		State NY					
ZIP Code 13312							
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY		District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> <b>Transaction ID: D9541</b>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; padding: 2px; text-align: right;">154.31</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ►			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 437 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Mary Simard				Purpose of Expenditure Mileage Reimbursement <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 5688 Northshor Rd. Brantingham, NY 13312					
City Brantingham		State NY		ZIP Code 13312	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">53725.38</div>				Date MM / DD / YYYY 11 / 06 / 2006	
Transaction ID: D9037				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">34.30</div>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Mary Simard				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 5688 Northshor Rd. Brantingham, NY 13312					
City Brantingham		State NY		ZIP Code 13312	
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 24	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">53725.38</div>				Date MM / DD / YYYY 11 / 01 / 2006	
Transaction ID: D9443				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">88.18</div>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Matthew M. Healy				Purpose of Expenditure Persuasion Canvassing <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 134 Spring Street Albany, NY 12203					
City Albany		State NY		ZIP Code 12203	
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">61752.08</div>				Date MM / DD / YYYY 11 / 01 / 2006	
Transaction ID: D9336				Amount <div style="border: 1px solid black; width: 150px; text-align: center;">33.07</div>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 150px; text-align: center;">155.55</div>	
TOTAL This Period (last page this line number only) .....			





**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 440 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address
		City _____ State _____ ZIP Code _____

  

Full Name (Last, First, Middle Initial) of Each Payee Michael J. Bishop				Purpose of Expenditure Persuasion Canva-ssing		Category/Type
Mailing Address 15 Grand Street Auburn, NY 13021				Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6		Amount 99.20
City Auburn State NY ZIP Code 13021		Name of Federal Candidate Supported				
Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24				
Aggregate General Election Expenditure for this Candidate ► 53725.38				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)		
Transaction ID: D9581						

  

Full Name (Last, First, Middle Initial) of Each Payee Michael J. Bishop				Purpose of Expenditure Persuasion Canva-ssing		Category/Type
Mailing Address 15 Grand Street Auburn, NY 13021				Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6		Amount 33.07
City Auburn State NY ZIP Code 13021		Name of Federal Candidate Supported				
Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24				
Aggregate General Election Expenditure for this Candidate ► 53725.38				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)		
Transaction ID: D9475						

  

Full Name (Last, First, Middle Initial) of Each Payee Michael J. Bishop				Purpose of Expenditure Persuasion Canva-ssing		Category/Type
Mailing Address 15 Grand Street Auburn, NY 13021				Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6		Amount 109.66
City Auburn State NY ZIP Code 13021		Name of Federal Candidate Supported				
Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24				
Aggregate General Election Expenditure for this Candidate ► 53725.38				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)		
Transaction ID: D9276						

  

SUBTOTAL of Expenditures This Page (optional) .....		241.93
TOTAL This Period (last page this line number only) .....		







**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 443 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Mike Levine				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 19 Granite Street Saratoga Springs, NY 12866				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 5 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">93.49</div>	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20							
Kirsten Gillibrand				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>					
		Transaction ID: D9856					

  

Full Name (Last, First, Middle Initial) of Each Payee Mike Levine				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 19 Granite Street Saratoga Springs, NY 12866				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 8 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20							
Kirsten Gillibrand				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>					
		Transaction ID: D9517					

  

Full Name (Last, First, Middle Initial) of Each Payee Mike Levine				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 19 Granite Street Saratoga Springs, NY 12866				Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 6</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">64.02</div>	
City State ZIP Code Saratoga Springs NY 12866							
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20							
Kirsten Gillibrand				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			
Aggregate General Election Expenditure for this Candidate ▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>					
		Transaction ID: D9758					

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">190.58</div>	
TOTAL This Period (last page this line number only) .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 444 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Mike Levine				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 19 Granite Street      Saratoga Springs, NY 12866				Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6	
City      State      ZIP Code Saratoga Springs      NY      12866		Amount <div style="border: 1px solid black; width: 100%; text-align: right;">89.40</div>			
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 20	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 100%; text-align: right;">61752.08</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D9241</b>					

  

Full Name (Last, First, Middle Initial) of Each Payee Paul Banuski				Purpose of Expenditure Persuasion Canva-ssing <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 43 Academy Street      Skaneateles, NY 13152				Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
City      State      ZIP Code Skaneateles      NY      13152		Amount <div style="border: 1px solid black; width: 100%; text-align: right;">296.66</div>			
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 100%; text-align: right;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D9270</b>					

  

Full Name (Last, First, Middle Initial) of Each Payee Paul Banuski				Purpose of Expenditure Mileage Reimburs-ement <div style="border: 1px solid black; width: 100px; height: 20px; float: right; margin-top: -20px;">Category/Type</div>	
Mailing Address 43 Academy Street      Skaneateles, NY 13152				Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6	
City      State      ZIP Code Skaneateles      NY      13152		Amount <div style="border: 1px solid black; width: 100%; text-align: right;">1.75</div>			
Name of Federal Candidate Supported Michael A. Arcuri		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY    District: 24	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 100%; text-align: right;">53725.38</div>				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D8970</b>					

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		387.81
<b>TOTAL</b> This Period (last page this line number only) ..... ►		





**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 447 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address
City		State      ZIP Code

  

Full Name (Last, First, Middle Initial) of Each Payee Peter J. Gilbert		Purpose of Expenditure Persuasion Canva- ssing	<input type="text"/> Category/Type
Mailing Address 21 Ellsworth Avenue      Delmar, NY 12054		Date <div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid black; padding: 2px;">M</div> <div style="border: 1px solid black; padding: 2px;">M</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">D</div> <div style="border: 1px solid black; padding: 2px;">D</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">Y</div> <div style="border: 1px solid black; padding: 2px;">Y</div> <div style="border: 1px solid black; padding: 2px;">Y</div> <div style="border: 1px solid black; padding: 2px;">Y</div> </div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>01</div> <div>2006</div> </div>	
City      State      ZIP Code Delmar      NY      12054		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">61752.08</div>		Transaction ID: D9328	

  

Full Name (Last, First, Middle Initial) of Each Payee Rasaad Dillard		Purpose of Expenditure Persuasion Canva- ssing	<input type="text"/> Category/Type
Mailing Address 2 Kennedy Plaza, #25 West      Utica, NY 13502		Date <div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid black; padding: 2px;">M</div> <div style="border: 1px solid black; padding: 2px;">M</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">D</div> <div style="border: 1px solid black; padding: 2px;">D</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">Y</div> <div style="border: 1px solid black; padding: 2px;">Y</div> <div style="border: 1px solid black; padding: 2px;">Y</div> <div style="border: 1px solid black; padding: 2px;">Y</div> </div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>08</div> <div>2006</div> </div>	
City      State      ZIP Code Utica      NY      13502		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">95.06</div>	
Name of Federal Candidate Supported Michael A. Arcuri	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div>		Transaction ID: D9807	

  

Full Name (Last, First, Middle Initial) of Each Payee Rasaad Dillard		Purpose of Expenditure Persuasion Canva- ssing	<input type="text"/> Category/Type
Mailing Address 2 Kennedy Plaza, #25 West      Utica, NY 13502		Date <div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid black; padding: 2px;">M</div> <div style="border: 1px solid black; padding: 2px;">M</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">D</div> <div style="border: 1px solid black; padding: 2px;">D</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">Y</div> <div style="border: 1px solid black; padding: 2px;">Y</div> <div style="border: 1px solid black; padding: 2px;">Y</div> <div style="border: 1px solid black; padding: 2px;">Y</div> </div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>15</div> <div>2006</div> </div>	
City      State      ZIP Code Utica      NY      13502		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33.07</div>	
Name of Federal Candidate Supported Michael A. Arcuri	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div>		Transaction ID: D9600	

  

SUBTOTAL of Expenditures This Page (optional) .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">161.20</div>
TOTAL This Period (last page this line number only) .....	







**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 450 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee				<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee			
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address			
		City		State      ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee Robert C. Squires				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type																					
Mailing Address 8 Van Dorn Street      Saratoga Springs, NY 12866				Date <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	8	/	2	0	0	6
M	M	/	D					D	/	Y	Y	Y	Y														
1	1	/	0					8	/	2	0	0	6														
City Saratoga Springs		State NY		ZIP Code 12866																							
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20																							
Aggregate General Election Expenditure for this Candidate ► <span style="border: 1px solid black; padding: 2px 20px;">61752.08</span>				Amount <div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">27.55</div>																							
Transaction ID: D9840				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																							

  

Full Name (Last, First, Middle Initial) of Each Payee Robert C. Squires				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type																					
Mailing Address 8 Van Dorn Street      Saratoga Springs, NY 12866				Date <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	0	6
M	M	/	D					D	/	Y	Y	Y	Y														
1	1	/	0					1	/	2	0	0	6														
City Saratoga Springs		State NY		ZIP Code 12866																							
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20																							
Aggregate General Election Expenditure for this Candidate ► <span style="border: 1px solid black; padding: 2px 20px;">61752.08</span>				Amount <div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">68.88</div>																							
Transaction ID: D9779				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																							

  

Full Name (Last, First, Middle Initial) of Each Payee Robert D. Johnsen				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type																					
Mailing Address 15 Caroline Street      Saratoga Springs, NY 12866				Date <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	5	/	2	0	0	6
M	M	/	D					D	/	Y	Y	Y	Y														
1	0	/	2					5	/	2	0	0	6														
City Saratoga Springs		State NY		ZIP Code 12866																							
Name of Federal Candidate Supported Kirsten Gillibrand		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20																							
Aggregate General Election Expenditure for this Candidate ► <span style="border: 1px solid black; padding: 2px 20px;">61752.08</span>				Amount <div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">33.07</div>																							
Transaction ID: D9234				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)																							

  

SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">129.50</div>	
TOTAL This Period (last page this line number only) .....		<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	









**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 455 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee Stephen Hilyer				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 24 Lawton Avenue Auburn, NY 13021				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 01 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">195.61</div>	
City Auburn State NY ZIP Code 13021		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					
Name of Federal Candidate Supported: Michael A. Arcuri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> Transaction ID: D9748							

  

Full Name (Last, First, Middle Initial) of Each Payee Stephen Hilyer				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 24 Lawton Avenue Auburn, NY 13021				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>10 / 25 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">66.13</div>	
City Auburn State NY ZIP Code 13021		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					
Name of Federal Candidate Supported: Michael A. Arcuri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> Transaction ID: D9226							

  

Full Name (Last, First, Middle Initial) of Each Payee Stephen Hilyer				Purpose of Expenditure Persuasion Canva-ssing		<input type="text"/> Category/Type	
Mailing Address 24 Lawton Avenue Auburn, NY 13021				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>11 / 15 / 2006</div> </div>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">129.42</div>	
City Auburn State NY ZIP Code 13021		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					
Name of Federal Candidate Supported: Michael A. Arcuri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 24							
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; padding: 2px; text-align: right;">53725.38</div> Transaction ID: D9620							

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		<div style="border: 1px solid black; padding: 2px; text-align: right;">391.16</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ►			













**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 461 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Mailing Address	
		City _____ State _____ ZIP Code _____	

  

Full Name (Last, First, Middle Initial) of Each Payee <b>[MEMO ITEM]</b> Exxon Mobil				Purpose of Expenditure Canvassing Travel/Gas <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 1181 Western Avenue Albany, NY 12203				Date MM / DD / YYYY 11 / 06 / 2006	
City Albany State NY ZIP Code 12203		Name of Federal Candidate Supported Kirsten Gillibrand		Amount <div style="border: 1px solid black; width: 150px; text-align: right;">10.00</div>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right;">61752.08</div>				Transaction ID: D9014	

  

Full Name (Last, First, Middle Initial) of Each Payee <b>[MEMO ITEM]</b> Staples				Purpose of Expenditure Canvassing Supplies <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 3035 Route 50 Saratoga Springs, NY 12866				Date MM / DD / YYYY 11 / 06 / 2006	
City Saratoga Springs State NY ZIP Code 12866		Name of Federal Candidate Supported Kirsten Gillibrand		Amount <div style="border: 1px solid black; width: 150px; text-align: right;">9.08</div>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right;">61752.08</div>				Transaction ID: D9015	

  

Full Name (Last, First, Middle Initial) of Each Payee David Danielson				Purpose of Expenditure Expense Reimbursements-see below <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>	
Mailing Address 9 Mountain Street Plainfield, MA 01070				Date MM / DD / YYYY 11 / 06 / 2006	
City Plainfield State MA ZIP Code 01070		Name of Federal Candidate Supported Kirsten Gillibrand		Amount <div style="border: 1px solid black; width: 150px; text-align: right;">45.83</div>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: NY District: 20		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Aggregate General Election Expenditure for this Candidate ► <div style="border: 1px solid black; width: 150px; text-align: right;">61752.08</div>				Transaction ID: D9021	

  

SUBTOTAL of Expenditures This Page (optional) ►		<div style="border: 1px solid black; width: 150px; text-align: right;">45.83</div>
TOTAL This Period (last page this line number only) ►		

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 462 / 585

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO  If YES, name the designating committee:  DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Full Name of Subordinate Committee	
Mailing Address		City State ZIP Code
Full Name (Last, First, Middle Initial) of Each Payee <b>[MEMO ITEM]</b> David Danielson		Purpose of Expenditure Mileage Reimbursement <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"></div> Category/Type
Mailing Address 9 Mountain Street Plainfield, MA 01070		Date MM / DD / YYYY 11 / 06 / 2006
City State ZIP Code Plainfield MA 01070	Amount <div style="border: 1px solid black; width: 150px; height: 20px; margin-top: 5px;"></div> 38.39	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20	Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) <input type="checkbox"/>
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; height: 20px; margin-top: 5px;"></div> 61752.08 Transaction ID: D9022		
Full Name (Last, First, Middle Initial) of Each Payee <b>[MEMO ITEM]</b> Soave Faire Art & Office Supplies		Purpose of Expenditure Canvassing Supplies <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"></div> Category/Type
Mailing Address 449 Broadway Saratoga Springs, NY 12866		Date MM / DD / YYYY 11 / 06 / 2006
City State ZIP Code Saratoga Springs NY 12866	Amount <div style="border: 1px solid black; width: 150px; height: 20px; margin-top: 5px;"></div> 7.44	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20	Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) <input type="checkbox"/>
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; height: 20px; margin-top: 5px;"></div> 61752.08 Transaction ID: D9023		
SUBTOTAL of Expenditures This Page (optional) .....		<div style="border: 1px solid black; width: 150px; height: 20px; margin-top: 5px;"></div> 0.00
TOTAL This Period (last page this line number only) .....		<div style="border: 1px solid black; width: 150px; height: 20px; margin-top: 5px;"></div> 175587.99

**SCHEDULE H2 (FEC Form 3X)****ALLOCATION RATIOS**

PAGE 63 / 585

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee****RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

<b>ACTIVITY OR EVENT IDENTIFIER</b> <b>Unity 2006</b> <hr/> <b>ACTIVITY IS:</b> <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support <b>CHECK IF THE RATIO IS:</b> <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	<b>FEDERAL %</b> <div>70.00 %</div>	<b>NONFEDERAL %</b> <div>30.00 %</div> <b>Transaction ID:</b> R47
<b>ACTIVITY OR EVENT IDENTIFIER</b> <b>Holiday 06</b> <hr/> <b>ACTIVITY IS:</b> <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support <b>CHECK IF THE RATIO IS:</b> <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	<b>FEDERAL %</b> <div>30.00 %</div>	<b>NONFEDERAL %</b> <div>70.00 %</div> <b>Transaction ID:</b> R48

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 464 / 585

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

NAME OF ACCOUNT  
 NYSDC Housekeeping

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

54135.02

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

53334.17

Transaction ID: T125

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) Unity 2006

760.50

Transaction ID: T126

b) Labor Lunch (7/14/-  
06)

19.17

Transaction ID: T127

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....



**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 465 / 585  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full) New York State Democratic Committee
--

NAME OF ACCOUNT NYSDC Housekeeping	DATE OF RECEIPT <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; border: 1px solid black; width: 15%;">M 10</td> <td style="text-align: center; border: 1px solid black; width: 15%;">D 30</td> <td style="text-align: center; border: 1px solid black; width: 15%;">Y 2006</td> </tr> </table>	M 10	D 30	Y 2006	TOTAL AMOUNT TRANSFERRED <div style="border: 1px solid black; padding: 2px; text-align: center;">continued</div>
M 10	D 30	Y 2006			

<b>BREAKDOWN OF TRANSFER RECEIVED</b>	
i) <b>Total Administrative</b> .....	<div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <b>Transaction ID:</b>
ii) <b>Generic Voter Drive</b> .....	<div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <b>Transaction ID:</b>
iii) <b>Exempt Activities</b> .....	<div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <b>Transaction ID:</b>
iv) <b>Direct Fundraising</b> (List Activity or Event Identifier)	
a) <u>Saratoga 06</u>	<div style="border: 1px solid black; width: 150px; text-align: right; margin-bottom: 5px;">21.18</div> <b>Transaction ID:</b> T128
b) _____	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div> <b>Transaction ID:</b>
c) Total Amount Transferred for Direct Fundraising .....	<div style="border: 1px solid black; width: 150px; text-align: right; margin-bottom: 5px;">800.85</div>
v) <b>Direct Candidate Support</b> (List of Activity or Event Identifier)	
a) _____	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div> <b>Transaction ID:</b>
b) _____	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div> <b>Transaction ID:</b>
c) Total Amount Transferred For Direct Candidate Support .....	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div>
vi) <b>Public Communications Referring Only to Party</b> (Made by PAC)	
	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div> <b>Transaction ID:</b>

<b>TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED</b>	
<b>TOTAL</b> This Period (Administrative) .....	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div>
<b>TOTAL</b> This Period (Generic Voter Drive) .....	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div>
<b>TOTAL</b> This Period (Exempt Activities) .....	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div>
<b>TOTAL</b> This Period (Direct Fundraising) .....	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div>
<b>TOTAL</b> This Period (Direct Candidate Support) .....	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div>
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div>
<b>TOTAL</b> This Period (Total Amount Transferred) .....	<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div>

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 466 / 585

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

NAME OF ACCOUNT  
 NYSDC Housekeeping

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 1 / 0 9 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

33735.15

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

33735.15

Transaction ID: T129

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 467 / 585

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

NAME OF ACCOUNT

NYS Campaign

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	6

TOTAL AMOUNT TRANSFERRED

22424.35

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

20377.85

Transaction ID: T130

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) Unity 2006

2046.50

Transaction ID: T131

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

2046.50

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 468 / 585

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

NAME OF ACCOUNT

NYS Campaign

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	6

TOTAL AMOUNT TRANSFERRED

79000.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

79000.00

Transaction ID: T132

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

186447.17

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

2847.35

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

189294.52

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 469 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 6 Group

Mailing Address

41 Union Square West, Suite 818

City State Zip Code

New York NY 10003

Purpose of Disbursement:  
 Fundraising Consulting Non-Cand. Spec.

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 2 / 2 0 0 6

Transaction ID: D8394H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

420.00

1580.00

2000.00

**B. Full Name (Last, First, Middle Initial)**  
 A+ Conferencing

Mailing Address

P.O. Box 631089

City State Zip Code  
 Houston TX 77263-1089

Purpose of Disbursement:  
 Teleconference

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8653H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

47.99

180.57

228.56

**C. Full Name (Last, First, Middle Initial)**  
 Aetna

Mailing Address

P.O. Box 7247-0233

City State Zip Code  
 Philadelphia PA 19170-0233

Purpose of Disbursement:  
 Health Insurance

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 2 0 / 2 0 0 6

Transaction ID: D8907H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

406.74

1530.16

1936.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

874.73

3290.73

4165.46

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 470 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 American Express Establishment Service

Mailing Address

P.O. Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement:  
 Credit Card Fee

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8260H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.95		233.05		295.00

**B. Full Name (Last, First, Middle Initial)**  
 American Express Establishment Service

Mailing Address

P.O. Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement:  
 Credit Card Fee

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	3

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8261H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
204.43		769.07		973.50

**C. Full Name (Last, First, Middle Initial)**  
 American Express Establishment Service

Mailing Address

P.O. Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement:  
 Credit Card Fee

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
0	7

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8259H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.32		8.74		11.06

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
268.70		1010.86		1279.56

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 471 / 585  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
American Express Establishment Service

Mailing Address

P.O. Box 53852

 City State Zip Code  
Phoenix AZ 85072-3852

 Purpose of Disbursement:  
Credit Card Fee
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 6

Transaction ID: D8908H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.17		139.83		177.00

**B. Full Name (Last, First, Middle Initial)**  
American Express Establishment Service

Mailing Address

P.O. Box 53852

 City State Zip Code  
Phoenix AZ 85072-3852

 Purpose of Disbursement:  
Credit Card Fee
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 6

Transaction ID: D8909H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.77		480.67		608.44

**C. Full Name (Last, First, Middle Initial)**  
American Express Establishment Service

Mailing Address

P.O. Box 53852

 City State Zip Code  
Phoenix AZ 85072-3852

 Purpose of Disbursement:  
Credit Card Fee
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 0 6

Transaction ID: D8257H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
.94		3.56		4.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.88		624.06		789.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 472 / 585  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Central Bancard LLC

Mailing Address

5405 Utica Ridge Road, Suite 208

City State Zip Code  
Davenport IA 52807

Purpose of Disbursement:  
Credit Card Fee

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
1 1 / 0 2 / 2 0 0 6

Transaction ID: D8258H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
237.67		894.13		1131.80

**B. Full Name (Last, First, Middle Initial)**  
Clarion Hotel & Conference Center

Mailing Address

30 Lake Shore Drive East

City State Zip Code  
Dunkirk NY 14048

Purpose of Disbursement:  
Sales Tax for Meeting

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8665H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.57		9.68		12.25

**C. Full Name (Last, First, Middle Initial)**  
Coffee Distributing Corp.

Mailing Address

200 Broadway, P.O. Box 766

City State Zip Code  
Garden City Park NY 11040

Purpose of Disbursement:  
Water Cooler/Equipment Rental

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8660H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.09		4.11		5.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
241.33		907.92		1149.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 473 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Cool Breeze Air Conditioning, Inc.

Mailing Address

505 8th Ave., Suite 702

City	State	Zip Code
New York	NY	10018

Purpose of Disbursement:  
Office MaintenanceCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8671H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

20.48

77.06

97.54

**B. Full Name (Last, First, Middle Initial)**  
Coolidge Ventures, LLC

Mailing Address

One West Red Oak Lane

City	State	Zip Code
White Plains	NY	10604

Purpose of Disbursement:  
RentCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8616H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

157.50

592.50

750.00

**C. Full Name (Last, First, Middle Initial)**  
Dell Commercial Credit

Mailing Address

Dept. 50 - 0049524567, P.O. Box 689020

City	State	Zip Code
Des Moines	IA	50368-9020

Purpose of Disbursement:  
Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8664H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

94.27

354.64

448.91

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

272.25

1024.20

1296.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 474 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Deluxe Business Checks & Solutions

Mailing Address

P.O. Box 1186

City

State

Zip Code

Lancaster

CA

93584-9960

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y

1 1 / 1 0 / 2 0 0 6

Transaction ID: D9081H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

24.78

93.24

118.02

**B. Full Name (Last, First, Middle Initial)**  
 Deluxe Business Checks & Solutions

Mailing Address

P.O. Box 1186

City

State

Zip Code

Lancaster

CA

93584-9960

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y

1 1 / 0 8 / 2 0 0 6

Transaction ID: D8611H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

46.51

175.01

221.52

**C. Full Name (Last, First, Middle Initial)**  
 Erin Dooley

Mailing Address

132 North 5th Street, Apt. 2-1

City

State

Zip Code

Brooklyn

NY

11211

Purpose of Disbursement:  
 Wages

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y

1 1 / 1 5 / 2 0 0 6

Transaction ID: D8676H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

286.17

1076.58

1362.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

357.46

1344.83

1702.29

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 475 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Entrepreneur Growth Capital

Mailing Address

505 Park Avenue, 6th Floor

City State Zip Code

New York NY 10022

Purpose of Disbursement:  
 Website

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8666H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

279.82

1052.68

1332.50

**B. Full Name (Last, First, Middle Initial)**  
 Herman D. Farrell, Jr.

Mailing Address

159-00 Riverside Drive, W, Apt. 7G

City State Zip Code

New York NY 10032-1008

Purpose of Disbursement:  
 Wages

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8679H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

428.11

1610.51

2038.62

**C. Full Name (Last, First, Middle Initial)**  
 Herman D. Farrell, Jr.

Mailing Address

159-00 Riverside Drive, W, Apt. 7G

City State Zip Code

New York NY 10032-1008

Purpose of Disbursement:  
 Wages

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 10 / 31 / 2006

Transaction ID: D8369H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

428.11

1610.51

2038.62

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1136.04

4273.70

5409.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 476 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 FedEx

Mailing Address

P.O. Box 371461

City	State	Zip Code
Pittsburgh	PA	15250-7461

Purpose of Disbursement:  
 Shipping

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8308H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20		15.82		20.02

**B. Full Name (Last, First, Middle Initial)**  
 FedEx

Mailing Address

P.O. Box 371461

City	State	Zip Code
Pittsburgh	PA	15250-7461

Purpose of Disbursement:  
 Shipping

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8655H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.01		97.89		123.90

**C. Full Name (Last, First, Middle Initial)**  
 FishNet Online

Mailing Address

77-670 Springfield Lane, Suite 11B

City	State	Zip Code
Palm Desert	CA	92211

Purpose of Disbursement:  
 Internet Access

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8311H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.40		88.05		111.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.61		201.76		255.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 477 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
GE Capital

Mailing Address

P.O. Box 642333

City

Pittsburgh

State

PA

Zip Code

15264-2333

Purpose of Disbursement:  
Equipment LeaseCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 1

D D

1 5

Y Y

2 0

Y Y

0 6

Transaction ID: D8662H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

29.58

111.31

140.89

**B. Full Name (Last, First, Middle Initial)**  
Cynthia A. German

Mailing Address

27 Broadway Terrace Apt. 1D

City

New York

State

NY

Zip Code

10040-4714

Purpose of Disbursement:  
WagesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 1

D D

1 5

Y Y

2 0

Y Y

0 6

Transaction ID: D8680H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

239.11

899.53

1138.64

**C. Full Name (Last, First, Middle Initial)**  
Cynthia A. German

Mailing Address

27 Broadway Terrace Apt. 1D

City

New York

State

NY

Zip Code

10040-4714

Purpose of Disbursement:  
WagesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 0

D D

3 1

Y Y

2 0

Y Y

0 6

Transaction ID: D8370H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

239.11

899.53

1138.64

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

507.80

1910.37

2418.17

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 478 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Caroline Griffin

Mailing Address  
 8 Myton Lane

City State Zip Code  
 Menands NY 12204

Purpose of Disbursement:  
 Wages

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date MM / DD / YYYY  
 11 / 15 / 2006

Transaction ID: D8682H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

235.63

886.42

1122.05

**B. Full Name (Last, First, Middle Initial)**  
 Hudson Media Partners, LLC

Mailing Address  
 3299 K Street, NW, Suite 500

City State Zip Code  
 Washington DC 20007

Purpose of Disbursement:  
 Media Consulting thru 8/1 Non-Cand. Spec

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date MM / DD / YYYY  
 11 / 06 / 2006

Transaction ID: D8556H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6549.57

24638.88

31188.45

**C. Full Name (Last, First, Middle Initial)**  
 IBF Consulting, Inc.

Mailing Address  
 200 East 36th Street, Suite 6D

City State Zip Code  
 New York NY 10016

Purpose of Disbursement:  
 Computer Consulting

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date MM / DD / YYYY  
 10 / 25 / 2006

Transaction ID: D8302H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

155.92

586.58

742.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6941.12

26111.88

33053.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 479 / 585  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
InfoHighway Communications

Mailing Address

Eureka Networks P.O. Box 26915

 City State Zip Code  
New York NY 10087-6915

 Purpose of Disbursement:  
Internet Access
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date 

M	M
1	0

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8305H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

140.44

528.35

668.79

**B. Full Name (Last, First, Middle Initial)**  
Kyocera Mita America, Inc.

Mailing Address

225 Sand Rd.

 City State Zip Code  
Fairfield NJ 07004

 Purpose of Disbursement:  
Copier Maintenance
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date 

M	M
1	0

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8303H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

60.58

227.91

288.49

**C. Full Name (Last, First, Middle Initial)**  
LexisNexis

Mailing Address

P.O. Box 7247-7090

 City State Zip Code  
Philadelphia PA 19170-7090

 Purpose of Disbursement:  
Research Subscriptions
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date 

M	M
1	0

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8306H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

68.73

258.56

327.29

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

269.75

1014.82

1284.57

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 480 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 MCI MEGA Preferred

Mailing Address

P.O. Box 371838

City

State

Zip Code

Pittsburgh

PA

15250-7838

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

/

D D

/

Y Y

Y Y

1 1

1 5

2 0

0 6

Transaction ID: D8652H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3.75

14.12

17.87

**B. Full Name (Last, First, Middle Initial)**  
 Metro Strategies, LLC

Mailing Address

895 Broadway, 5th Floor

City

State

Zip Code

New York

NY

10003

Purpose of Disbursement:  
 Exempt Printing

Category/  
Type

Activity or Event Identifier:  
 Exempt Activity

Type of Allocated Activity:

☐ Administrative ☐ Fundraising ☒ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33527.97

Date

M M

/

D D

/

Y Y

Y Y

1 1

0 1

2 0

0 6

Transaction ID: D8941H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

7040.87

26487.10

33527.97

**C. Full Name (Last, First, Middle Initial)**  
 MinuteMen

Mailing Address

dba Fleet Radio Dispatch P.O. Box 770729

City

State

Zip Code

Woodside

NY

11377

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

/

D D

/

Y Y

Y Y

1 1

1 5

2 0

0 6

Transaction ID: D8657H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

56.22

211.53

267.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

7100.84

26712.75

33813.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 481 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 New York Post

Mailing Address

P.O. Box 1407

City State Zip Code

Bellmawr NJ 08099

Purpose of Disbursement:  
 Back Issue Request

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8669H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.52

9.48

12.00

**B. Full Name (Last, First, Middle Initial)**  
 New York State Clipping Service

Mailing Address

75 East Northfield Road

City State Zip Code

Livingston NJ 07039

Purpose of Disbursement:  
 Newspaper/Periodical Clippings

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 10 / 25 / 2006

Transaction ID: D8307H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

35.69

134.29

169.98

**C. Full Name (Last, First, Middle Initial)**  
 Newmark & Co. Real Estate Inc.

Mailing Address

125 Park Avenue, 11th Floor

City State Zip Code

New York NY 10017

Purpose of Disbursement:  
 Office Rent (includes utilities)

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8667H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2157.63

8116.82

10274.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2195.84

8260.59

10456.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 482 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Newmark & Co. Real Estate Inc.

Mailing Address

125 Park Avenue, 11th Floor

City	State	Zip Code
New York	NY	10017

Purpose of Disbursement:  
 Office Rent (includes utilities)

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8668H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

366.80

1379.89

1746.69

**B. Full Name (Last, First, Middle Initial)**  
 Leslie Ng

Mailing Address

14 Colburn Rd

City	State	Zip Code
East Brunswick	NJ	08816-1103

Purpose of Disbursement:  
 Wages

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8695H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

263.81

992.45

1256.26

**C. Full Name (Last, First, Middle Initial)**  
 Leslie Ng

Mailing Address

14 Colburn Rd

City	State	Zip Code
East Brunswick	NJ	08816-1103

Purpose of Disbursement:  
 Wages

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8380H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

263.81

992.45

1256.26

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

894.42

3364.79

4259.21

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 483 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 NYSDC Non-Federal Account

Mailing Address

71 Broadway

City	State	Zip Code
New York	NY	10006

Purpose of Disbursement:  
 Txfr non-fed share of refund-see Line 15

Category/  
Type

Activity or Event Identifier:  
 Refund

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
2	7

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D9323H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
677.14		0.00		677.14

**B. Full Name (Last, First, Middle Initial)**  
 NYSEG

Mailing Address

P.O. Box 5600

City	State	Zip Code
Ithaca	NY	14852-5600

Purpose of Disbursement:  
 Utilities

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8663H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.44		321.42		406.86

**C. Full Name (Last, First, Middle Initial)**  
 PAYCHEX

Mailing Address

1551 S. Washington Ave., P.O. Box 1180

City	State	Zip Code
Piscataway	NJ	08854

Purpose of Disbursement:  
 Payroll Taxes/Withholdings

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D9894H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
914.85		3441.58		4356.43

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1677.43		3763.00		5440.43

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 484 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 PAYCHEX

Mailing Address

1551 S. Washington Ave., P.O. Box 1180

City State Zip Code

Piscataway NJ 08854

Purpose of Disbursement:  
 NY Surcharge

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	6

Transaction ID: D8364H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.80

18.06

22.86

**B. Full Name (Last, First, Middle Initial)**  
 PAYCHEX

Mailing Address

1551 S. Washington Ave., P.O. Box 1180

City State Zip Code

Piscataway NJ 08854

Purpose of Disbursement:  
 Payroll Taxes/Withholdings

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	6

Transaction ID: D9884H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

675.32

2540.52

3215.84

**C. Full Name (Last, First, Middle Initial)**  
 Penn, Schoen & Berland Associates, LLC

Mailing Address

99 Canal Center Plaza, Suite 400

City State Zip Code

Alexandria VA 22314

Purpose of Disbursement:  
 Exempt Printing

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	6

Transaction ID: D9062H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4410.00

16590.00

21000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5090.12

19148.58

24238.70

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 485 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Postmaster

Mailing Address

149 East 23rd Street

City State Zip Code

New York NY 10010

Purpose of Disbursement:  
 Fundraising Postage-Non-Candidate Spec.

Category/  
Type

Activity or Event Identifier:  
 Holiday 06

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3209.00

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 2 7 / 2 0 0 6

Transaction ID: D9702H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

362.70

846.30

1209.00

**B. Full Name (Last, First, Middle Initial)**  
 Press Association, Inc.

Mailing Address

P.O. Box 414243

City State Zip Code  
 Boston MA 02241-4243

Purpose of Disbursement:  
 Subscriptions

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 2 5 / 2 0 0 6

Transaction ID: D8309H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

153.09

575.91

729.00

**C. Full Name (Last, First, Middle Initial)**  
 Pritchard Industries, Inc.

Mailing Address

1120 Ave. of the Americas, 17th Fl

City State Zip Code  
 New York NY 10036

Purpose of Disbursement:  
 Office Cleaning

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 2 5 / 2 0 0 6

Transaction ID: D8310H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

148.62

559.10

707.72

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

664.41

1981.31

2645.72

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 486 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Rights Group

Mailing Address

18 West 27th Street, 10th Floor

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement:  
 Licensing Fee

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8304H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

227.43

855.57

1083.00

**B. Full Name (Last, First, Middle Initial)**  
 Robert A. Cumins

Mailing Address

P.O. Box 43624

City	State	Zip Code
Upper Montclair	NJ	07043

Purpose of Disbursement:  
 Photography-Non Candidate Specific

Category/  
Type

Activity or Event Identifier:  
 Unity 2006

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10430.67

Date 

M	M
1	1

 / 

D	D
0	2

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8551H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

665.00

285.00

950.00

**C. Full Name (Last, First, Middle Initial)**  
 Sheraton Hotel and Towers

Mailing Address

811 Seventh Avenue

City	State	Zip Code
New York	NY	10019

Purpose of Disbursement:  
 Reception Cost

Category/  
Type

Activity or Event Identifier:  
 Holiday 06

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3209.00

Date 

M	M
1	1

 / 

D	D
0	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D9701H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

600.00

1400.00

2000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1492.43

2540.57

4033.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 487 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Sheraton Hotel and Towers

Mailing Address

811 Seventh Avenue

City	State	Zip Code
New York	NY	10019

Purpose of Disbursement:  
 Election Night Reception Cost

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D9074H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21000.00

79000.00

100000.00

**B. Full Name (Last, First, Middle Initial)**  
 Signature Bank

Mailing Address

71 Broadway

City	State	Zip Code
New York	NY	10006

Purpose of Disbursement:  
 Bank Charges

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8363H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

42.00

158.00

200.00

**C. Full Name (Last, First, Middle Initial)**  
 Signature Bank

Mailing Address

71 Broadway

City	State	Zip Code
New York	NY	10006

Purpose of Disbursement:  
 Bank Charges

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8920H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

16.80

63.20

80.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21058.80

79221.20

100280.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 488 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Somos El Futuro, Inc.

Mailing Address

P.O. Box 2048, ESP Station

City State Zip Code  
 Albany NY 12220

Purpose of Disbursement:  
 Sponsorship Fee

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 0 2 / 2 0 0 6

Transaction ID: D8552H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

630.00

2370.00

3000.00

**B. Full Name (Last, First, Middle Initial)**  
 Sprint

Mailing Address

P.O. Box 17621

City State Zip Code  
 Baltimore MD 21297-1621

Purpose of Disbursement:  
 Blackberry Service

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8658H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

72.62

273.23

345.85

**C. Full Name (Last, First, Middle Initial)**  
 Staples Credit Plan

Mailing Address

Dept. 00-02249829, P.O. Box 6721

City State Zip Code  
 The Lakes NV 88901-6721

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8654H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

24.74

93.10

117.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

727.36

2736.33

3463.69

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 489 / 585  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Time Warner Cable of NYC

Mailing Address

P.O. Box 9227

 City State Zip Code  
Uniondale NY 11555

 Purpose of Disbursement:  
Cable Service
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8659H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.55		182.65		231.20

**B. Full Name (Last, First, Middle Initial)**  
Time Warner Cable

Mailing Address

P.O. Box 4222

 City State Zip Code  
Buffalo NY 14240-4222

 Purpose of Disbursement:  
Cable Service
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8661H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.78		63.17		79.95

**C. Full Name (Last, First, Middle Initial)**  
T-Mobile

Mailing Address

P.O. Box 742596

 City State Zip Code  
Cincinnati OH 45274-2596

 Purpose of Disbursement:  
Blackberry/Cellphone Service
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8672H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
329.01		1237.74		1566.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
394.34		1483.56		1877.90

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 490 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Thomas A. Torto

Mailing Address  
 P.O. Box 290

City State Zip Code  
 Binghamton NY 13903

Purpose of Disbursement:  
 Utilities

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 2 5 / 2 0 0 6

Transaction ID: D8312H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 7.32		<input type="text"/> 27.54		<input type="text"/> 34.86

**B. Full Name (Last, First, Middle Initial)**  
 Trans Country Storage, Inc.

Mailing Address  
 3300 Veterans Highway

City State Zip Code  
 Bohemia NY 11716

Purpose of Disbursement:  
 Storage Rent

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8650H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 17.10		<input type="text"/> 64.37		<input type="text"/> 81.47

**C. Full Name (Last, First, Middle Initial)**  
 UPS

Mailing Address  
 P.O. Box 7247-0244

City State Zip Code  
 Philadelphia PA 19170-0001

Purpose of Disbursement:  
 Shipping

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 2 5 / 2 0 0 6

Transaction ID: D8313H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 5.58		<input type="text"/> 21.03		<input type="text"/> 26.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 30.00		<input type="text"/> 112.94		<input type="text"/> 142.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 491 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 UPS

Mailing Address

P.O. Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170-0001

Purpose of Disbursement:  
 Shipping

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8670H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.86		195.13		246.99

**B. Full Name (Last, First, Middle Initial)**  
 Verdolino & Lowey, P.C.

Mailing Address

Pine Brook Office Park, 124 Washington Street

City	State	Zip Code
Foxborough	MA	02035

Purpose of Disbursement:  
 Professional Services-Accounting

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8300H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
186.06		699.94		886.00

**C. Full Name (Last, First, Middle Initial)**  
 Verizon

Mailing Address

P.O. Box 15124

City	State	Zip Code
Albany	NY	12212-5124

Purpose of Disbursement:  
 Telephone

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D9707H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.46		13.04		16.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
241.38		908.11		1149.49

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 492 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Verizon

Mailing Address

P.O. Box 15124

City	State	Zip Code
Albany	NY	12212-5124

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D9875H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.34		535.48		677.82

**B. Full Name (Last, First, Middle Initial)**  
 Verizon

Mailing Address

P.O. Box 15124

City	State	Zip Code
Albany	NY	12212-5124

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D9873H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
96.96		364.77		461.73

**C. Full Name (Last, First, Middle Initial)**  
 Verizon

Mailing Address

P.O. Box 15124

City	State	Zip Code
Albany	NY	12212-5124

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D9708H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.85		44.59		56.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
251.15		944.84		1195.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 493 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Verizon

Mailing Address

P.O. Box 15124

City	State	Zip Code
Albany	NY	12212-5124

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D9871H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.99		282.13		357.12

**B. Full Name (Last, First, Middle Initial)**  
 W. B. Mason Company Inc.

Mailing Address

P.O. Box 111, 59 Centre Street

City	State	Zip Code
Brockton	MA	02303

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8651H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.31		12.47		15.78

**C. Full Name (Last, First, Middle Initial)**  
 W. B. Mason Company Inc.

Mailing Address

P.O. Box 111, 59 Centre Street

City	State	Zip Code
Brockton	MA	02303

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8301H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.60		156.53		198.13

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
119.90		451.13		571.03

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 494 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Wells Fargo Financial Leasing

Mailing Address

P.O. Box 6434

City

State

Zip Code

Carol Stream

IL

60197-6434

Purpose of Disbursement:  
 Copier Rental

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8656H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

285.87

1075.45

1361.32

**B. Full Name (Last, First, Middle Initial)**  
 Blake Zeff

Mailing Address

391 Sackett Street, #2

City

State

Zip Code

Brooklyn

NY

11231

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 0 6

Transaction ID: D8298H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.94

11.06

14.00

**C. Full Name (Last, First, Middle Initial)**  
 NYC Taxi & Limousine Commission

Mailing Address

40 Rector Street

City

State

Zip Code

New York

NY

10006

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 0 6

Transaction ID: D8299H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.94

11.06

14.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

288.81

1086.51

1375.32

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 495 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Frank Hoare

Mailing Address

43 Aspinwall Rd.

City State Zip Code

Loudonville

NY

12211

Purpose of Disbursement:

Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	0	6

Transaction ID: D8314H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

33.28

125.22

158.50

**B. Full Name (Last, First, Middle Initial)**

Capitaland Taxi

Mailing Address

22 Kraft Avenue

City State Zip Code

Albany

NY

12205

Purpose of Disbursement:

Travel

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	0	6

Transaction ID: D8320H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.57

13.43

17.00

**C. Full Name (Last, First, Middle Initial)**

Capitaland Taxi

Mailing Address

22 Kraft Avenue

City State Zip Code

Albany

NY

12205

Purpose of Disbursement:

Travel

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	0	6

Transaction ID: D8315H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.94

11.06

14.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

33.28

125.22

158.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 496 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Frank Hoare

Mailing Address

43 Aspinwall Rd.

City	State	Zip Code
Loudonville	NY	12211

 Purpose of Disbursement:  
 Petty Cash Replenishment
Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8317H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21.00

79.00

100.00

**B. Full Name (Last, First, Middle Initial)**

NYC Taxi &amp; Limousine Commission

Mailing Address

40 Rector Street

City	State	Zip Code
New York	NY	10006

 Purpose of Disbursement:  
 Travel
Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8318H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.74

6.56

8.30

**C. Full Name (Last, First, Middle Initial)**

NYC Taxi &amp; Limousine Commission

Mailing Address

40 Rector Street

City	State	Zip Code
New York	NY	10006

 Purpose of Disbursement:  
 Travel
Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8316H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.58

9.72

12.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 497 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 NYC Taxi & Limousine Commission

Mailing Address  
 40 Rector Street

City State Zip Code  
 New York NY 10006

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	0	6

Transaction ID: D8319H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.44

5.46

6.90

**B. Full Name (Last, First, Middle Initial)**  
 Matthew Ehlinger

Mailing Address  
 96 South Swan Street

City State Zip Code  
 Albany NY 12210

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8617H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

141.20

531.20

672.40

**C. Full Name (Last, First, Middle Initial)**  
 Dell Marketing L.P.

Mailing Address  
 One Dell Way, RR8

City State Zip Code  
 Round Rock TX 78682

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8626H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

18.58

69.92

88.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

141.20

531.20

672.40

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 498 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Dell Marketing L.P.

Mailing Address

One Dell Way, RR8

City State Zip Code

Round Rock TX 78682

Purpose of Disbursement:  
Office SuppliesCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8621H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

36.28

136.50

172.78

**B. Full Name (Last, First, Middle Initial)**

E-ZPass

Mailing Address

P.O. Box 149004

City State Zip Code

Staten Island NY 10314-9004

Purpose of Disbursement:  
TollsCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8618H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.71

44.09

55.80

**C. Full Name (Last, First, Middle Initial)**

Mobil

Mailing Address

5959 Las Colinas Blvd.

City State Zip Code

Irving TX 75039-2298

Purpose of Disbursement:  
GasCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8619H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.94

18.63

23.57

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 499 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8630H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.10

15.47

19.57

**B. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8629H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.03

18.94

23.97

**C. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8624H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.38

20.27

25.65

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 500 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Sanna Mini Mart

Mailing Address

6325 Thompson Rd.

City	State	Zip Code
Syracuse	NY	13206

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8628H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.28

19.89

25.17

**B. Full Name (Last, First, Middle Initial)**  
 Staples

Mailing Address

3 Chevy Drive

City	State	Zip Code
East Syracuse	NY	13057

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8625H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.79

25.59

32.38

**C. Full Name (Last, First, Middle Initial)**  
 Staples

Mailing Address

3 Chevy Drive

City	State	Zip Code
East Syracuse	NY	13057

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8622H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.64

6.18

7.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 501 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Sunoco

Mailing Address

1735 Market Street, Ste LL

City

State

Zip Code

Mid City West

PA

19103-3758

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8620H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.38

20.27

25.65

**B. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address

P.O. Box 15062

City

State

Zip Code

Albany

NY

12212-5062

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8627H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

32.62

122.75

155.37

**C. Full Name (Last, First, Middle Initial)**  
 Wegmans

Mailing Address

4256 James Street

City

State

Zip Code

E Syracuse

NY

13057

Purpose of Disbursement:

Office Supplies

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8623H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.39

12.78

16.17

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 502 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Philip W. Giltner

Mailing Address

47 Albany Avenue, P.O. Box 47

City State Zip Code  
 Kinderhook NY 12106

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8631H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.22		230.32		291.54

**B. Full Name (Last, First, Middle Initial)**  
 Claverack General Store

Mailing Address

811 Route 66

City State Zip Code  
 Hudson NY 12534

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8632H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.46		24.34		30.80

**C. Full Name (Last, First, Middle Initial)**  
 Claverack General Store

Mailing Address

811 Route 66

City State Zip Code  
 Hudson NY 12534

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8633H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.00		22.60		28.60

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.22		230.32		291.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 503 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Claverack General Store

Mailing Address  
 811 Route 66

City State Zip Code  
 Hudson NY 12534

Purpose of Disbursement:  
 Gas

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8635H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.00

22.61

28.61

**B. Full Name (Last, First, Middle Initial)**  
 Claverack General Store

Mailing Address  
 811 Route 66

City State Zip Code  
 Hudson NY 12534

Purpose of Disbursement:  
 Gas

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8636H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.45

24.27

30.72

**C. Full Name (Last, First, Middle Initial)**  
 Claverack General Store

Mailing Address  
 811 Route 66

City State Zip Code  
 Hudson NY 12534

Purpose of Disbursement:  
 Gas

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8638H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.38

24.03

30.41

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 504 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8641H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.17

19.48

24.65

**B. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8642H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.72

21.54

27.26

**C. Full Name (Last, First, Middle Initial)**  
 Schodack General Store

Mailing Address

95 Miller Rd.

City

State

Zip Code

Castleton On Hudso

NY

12033

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8640H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.55

20.92

26.47

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 505 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Schodack General Store

Mailing Address

95 Miller Rd.

City State Zip Code

Castleton On Hudso NY 12033

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8639H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.95

26.17

33.12

**B. Full Name (Last, First, Middle Initial)**  
 Stewart's Shop

Mailing Address

PO Box 435

City State Zip Code

Saratoga Springs NY 12866

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8634H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.48

24.42

30.90

**C. Full Name (Last, First, Middle Initial)**  
 Zach Hollander

Mailing Address

96 South Swan Street

City State Zip Code

Albany NY 12210

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8643H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

41.84

157.44

199.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

41.84

157.44

199.28

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 506 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8644H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.40

27.88

35.28

**B. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8649H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.73

25.35

32.08

**C. Full Name (Last, First, Middle Initial)**  
 Stewart's Shop

Mailing Address

PO Box 435

City

State

Zip Code

Saratoga Springs

NY

12866

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8648H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.86

25.83

32.69

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 507 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Sunoco

Mailing Address

1735 Market Street, Ste LL

City

State

Zip Code

Mid City West

PA

19103-3758

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

/

D D

/

Y Y

Y Y

1 1

1 5

2 0

0 6

Transaction ID: D8645H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

7.10

26.75

33.85

**B. Full Name (Last, First, Middle Initial)**  
 Sunoco

Mailing Address

1735 Market Street, Ste LL

City

State

Zip Code

Mid City West

PA

19103-3758

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

/

D D

/

Y Y

Y Y

1 1

1 5

2 0

0 6

Transaction ID: D8647H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6.30

23.73

30.03

**C. Full Name (Last, First, Middle Initial)**  
 Watervliet Food Mart

Mailing Address

500 13th Street

City

State

Zip Code

Watervliet

NY

12189

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

/

D D

/

Y Y

Y Y

1 1

1 5

2 0

0 6

Transaction ID: D8646H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

7.42

27.93

35.35

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 508 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Whitney Kemp

Mailing Address

71 Slate Creek Drive

City State Zip Code

Cheektowaga

NY

14227

Purpose of Disbursement:

Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

/

D D

/

Y Y

Y Y

1 1

1 5

2 0

0 6

Transaction ID: D8704H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

160.25

602.88

763.13

**B. Full Name (Last, First, Middle Initial)**

Cingular Wireless

Mailing Address

2897 Union Rd.

City State Zip Code

Buffalo

NY

14227

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

/

D D

/

Y Y

Y Y

1 1

1 5

2 0

0 6

Transaction ID: D8722H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

38.71

145.67

184.38

**C. Full Name (Last, First, Middle Initial)**

Cingular Wireless

Mailing Address

P.O. Box 8220

City State Zip Code

Aurora

IL

60572-8220

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

/

D D

/

Y Y

Y Y

1 1

1 5

2 0

0 6

Transaction ID: D8708H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

22.87

86.08

108.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

160.25

602.88

763.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 509 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Grill

Mailing Address  
 454 Pearl Street

City State Zip Code  
 Buffalo NY 14202

Purpose of Disbursement:  
 Meetings/Meals

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8723H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3.57

13.43

17.00

**B. Full Name (Last, First, Middle Initial)**  
 Khatib Mobil Mart

Mailing Address  
 5761 Transit Rd.

City State Zip Code  
 Depew NY 14043

Purpose of Disbursement:  
 Gas

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8721H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.37

27.74

35.11

**C. Full Name (Last, First, Middle Initial)**  
 Khatib Mobil Mart

Mailing Address  
 5761 Transit Rd.

City State Zip Code  
 Depew NY 14043

Purpose of Disbursement:  
 Office Supplies

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8720H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.36

5.14

6.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 510 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Kmart

Mailing Address  
 2055 Walden Avenue

City State Zip Code  
 Cheektowaga NY 14225

Purpose of Disbursement:  
 Office Supplies

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8712H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3.02

11.39

14.41

**B. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address  
 5959 Las Colinas Blvd.

City State Zip Code  
 Irving TX 75039-2298

Purpose of Disbursement:  
 Gas

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8715H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.45

24.30

30.75

**C. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address  
 5959 Las Colinas Blvd.

City State Zip Code  
 Irving TX 75039-2298

Purpose of Disbursement:  
 Gas

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8711H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.90

29.73

37.63

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 511 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8709H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

8.48

31.92

40.40

**B. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8714H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

5.73

21.58

27.31

**C. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8724H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

9.27

34.88

44.15

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 512 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Office Max

Mailing Address

3735 Union Rd.

City	State	Zip Code
Cheektowaga	NY	14225

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8719H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.40

20.33

25.73

**B. Full Name (Last, First, Middle Initial)**  
 Sam's Club

Mailing Address

3735 Union Rd.

City	State	Zip Code
Cheektowaga	NY	14225

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8706H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.42

31.72

40.14

**C. Full Name (Last, First, Middle Initial)**  
 Sam's Club

Mailing Address

3735 Union Rd.

City	State	Zip Code
Cheektowaga	NY	14225

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8713H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.22

23.41

29.63

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 513 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Subway

Mailing Address

2789 Union Rd.

City State Zip Code

Cheektowaga

NY

14227

Purpose of Disbursement:  
Meetings/MealsCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8707H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.73

10.31

13.04

**B. Full Name (Last, First, Middle Initial)**

Subway

Mailing Address

2789 Union Rd.

City State Zip Code

Cheektowaga

NY

14227

Purpose of Disbursement:  
Meetings/MealsCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8710H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.96

14.92

18.88

**C. Full Name (Last, First, Middle Initial)**

Target

Mailing Address

1750 Walden Avenue

City State Zip Code

Cheektowaga

NY

14225

Purpose of Disbursement:  
Office SuppliesCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8716H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.31

8.73

11.04

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 514 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

The Home Depot

Mailing Address

300 Thruway Plaza Drive

City State Zip Code

Cheektowaga

NY

14225

Purpose of Disbursement:  
Office SuppliesCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8705H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

.61

2.33

2.94

**B. Full Name (Last, First, Middle Initial)**

The Home Depot

Mailing Address

300 Thruway Plaza Drive

City State Zip Code

Cheektowaga

NY

14225

Purpose of Disbursement:  
Office SuppliesCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8717H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.76

17.91

22.67

**C. Full Name (Last, First, Middle Initial)**

Tim Horton's

Mailing Address

2760 Union Rd.

City State Zip Code

Cheektowaga

NY

14227

Purpose of Disbursement:  
Meetings/MealsCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D9317H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.70

21.49

27.19

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 515 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Tony's Pizzeria & Pasta

Mailing Address  
 2770 Union Rd.

City State Zip Code  
 Cheektowaga NY 14227

Purpose of Disbursement:  
 Meetings/Meals

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D9316H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.53

17.06

21.59

**B. Full Name (Last, First, Middle Initial)**  
 US Postal Service

Mailing Address  
 285 Cayuga Rd.

City State Zip Code  
 Buffalo NY 14241

Purpose of Disbursement:  
 Mailing Supplies

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8718H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

.77

2.92

3.69

**C. Full Name (Last, First, Middle Initial)**  
 Caroline Griffin

Mailing Address  
 96 South Swan Street

City State Zip Code  
 Albany NY 12210

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8728H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

175.06

658.58

833.64

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

175.06

658.58

833.64

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE	516 / 585
FOR LINE 21a OF FORM 3X	

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Amtrak

Mailing Address

900 2nd Street, NE,

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
TravelCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative   ☐ Fundraising   ☐ Exempt  
☐ Voter Drive   ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8731H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.56

28.44

36.00

**B. Full Name (Last, First, Middle Initial)**  
Amtrak

Mailing Address

900 2nd Street, NE,

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
TravelCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative   ☐ Fundraising   ☐ Exempt  
☐ Voter Drive   ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8735H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.08

37.92

48.00

**C. Full Name (Last, First, Middle Initial)**  
Caroline Griffin

Mailing Address

96 South Swan Street

City	State	Zip Code
Albany	NY	12210

Purpose of Disbursement:  
MileageCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative   ☐ Fundraising   ☐ Exempt  
☐ Voter Drive   ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8729H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

142.69

536.82

679.51

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 517 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Maiden Lane of Albany, Inc.

Mailing Address

111 Washington Avenue

City	State	Zip Code
Albany	NY	12210

Purpose of Disbursement:  
Parking FeeCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8736H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.26

4.74

6.00

**B. Full Name (Last, First, Middle Initial)**

Staples

Mailing Address

1440 Central Avenue

City	State	Zip Code
Colonie	NY	12205

Purpose of Disbursement:  
Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8732H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.82

44.51

56.33

**C. Full Name (Last, First, Middle Initial)**

US Postmaster

Mailing Address

Fort Orange Station

City	State	Zip Code
Albany	NY	12220

Purpose of Disbursement:  
Office PostageCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8734H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.63

6.17

7.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 518 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Darren McCabe

Mailing Address

563 Cafferty Hill Rd.

City	State	Zip Code
Endicott	NY	13760

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8737H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
221.64		833.79		1055.43

**B. Full Name (Last, First, Middle Initial)**  
 Hess Corporation

Mailing Address

1185 Avenue of the Americas

City	State	Zip Code
New York	NY	10036

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8743H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.29		46.24		58.53

**C. Full Name (Last, First, Middle Initial)**  
 Hess Corporation

Mailing Address

1185 Avenue of the Americas

City	State	Zip Code
New York	NY	10036

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8739H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.10		4.18		5.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
221.64		833.79		1055.43

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 519 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Hess Corporation

## Mailing Address

1185 Avenue of the Americas

City State Zip Code

New York NY 10036

## Purpose of Disbursement:

Gas

Category/  
Type

## Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8755H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.17	27.02	34.19
------	-------	-------

**B. Full Name (Last, First, Middle Initial)**

Mighty Mart

## Mailing Address

733 Harry L Drive

City State Zip Code

Johnson City NY 13790

## Purpose of Disbursement:

Gas

Category/  
Type

## Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8751H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.13	8.04	10.17
------	------	-------

**C. Full Name (Last, First, Middle Initial)**

Nirchi's Pizza

## Mailing Address

166 Water Street

City State Zip Code

Binghamton NY 13901

## Purpose of Disbursement:

Meetings/Meals

Category/  
Type

## Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8748H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.08	37.92	48.00
-------	-------	-------

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 520 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Nirchi's Pizza

Mailing Address

166 Water Street

City	State	Zip Code
Binghamton	NY	13901

Purpose of Disbursement:  
 Meetings/Meals

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8744H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.20

15.80

20.00

**B. Full Name (Last, First, Middle Initial)**  
 Nirchi's Pizza

Mailing Address

166 Water Street

City	State	Zip Code
Binghamton	NY	13901

Purpose of Disbursement:  
 Meetings/Meals

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8738H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.00

18.81

23.81

**C. Full Name (Last, First, Middle Initial)**  
 Nirchi's Pizza

Mailing Address

166 Water Street

City	State	Zip Code
Binghamton	NY	13901

Purpose of Disbursement:  
 Meetings/Meals

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8747H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.40

31.60

40.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 521 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Quickway

Mailing Address

1231 Campville Rd.

City	State	Zip Code
Endicott	NY	13760

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8740H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.15		11.85		15.00

**B. Full Name (Last, First, Middle Initial)**  
 Quickway

Mailing Address

1231 Campville Rd.

City	State	Zip Code
Endicott	NY	13760

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8746H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.74		51.72		65.46

**C. Full Name (Last, First, Middle Initial)**  
 Quickway

Mailing Address

1231 Campville Rd.

City	State	Zip Code
Endicott	NY	13760

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8749H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.24		49.84		63.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 522 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Sam's Club

Mailing Address

2441 Vestal Parkway East

City	State	Zip Code
Vestal	NY	13850

Purpose of Disbursement:  
Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative
 ☐ Fundraising
 ☐ Exempt
 ☐ Voter Drive
 ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8741H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.36

5.13

6.49

**B. Full Name (Last, First, Middle Initial)**

Staples

Mailing Address

3701 Vestal Parkway East

City	State	Zip Code
Vestal	NY	13850

Purpose of Disbursement:  
Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative
 ☐ Fundraising
 ☐ Exempt
 ☐ Voter Drive
 ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8753H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.17

15.69

19.86

**C. Full Name (Last, First, Middle Initial)**

Staples

Mailing Address

3701 Vestal Parkway East

City	State	Zip Code
Vestal	NY	13850

Purpose of Disbursement:  
Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative
 ☐ Fundraising
 ☐ Exempt
 ☐ Voter Drive
 ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8742H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13.15

49.50

62.65

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 523 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Staples

Mailing Address

3701 Vestal Parkway East

City	State	Zip Code
Vestal	NY	13850

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8750H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

11.96

45.00

56.96

**B. Full Name (Last, First, Middle Initial)**  
 Staples

Mailing Address

3701 Vestal Parkway East

City	State	Zip Code
Vestal	NY	13850

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8745H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

60.28

226.79

287.07

**C. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address

P.O. Box 15062

City	State	Zip Code
Albany	NY	12212-5062

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8754H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

44.54

167.59

212.13

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 524 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Wegmans

Mailing Address  
 650 Harry L Drive

City State Zip Code  
 Johnson City NY 13790

Purpose of Disbursement:  
 Office Supplies

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8752H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.61

21.14

26.75

**B. Full Name (Last, First, Middle Initial)**  
 Frank P. Nemeth

Mailing Address  
 21 High Dune Dr

City State Zip Code  
 Albany NY 12203-5322

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8756H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

318.39

1197.79

1516.18

**C. Full Name (Last, First, Middle Initial)**  
 Allpro Parking

Mailing Address  
 303 Washington Street

City State Zip Code  
 Buffalo NY 14203

Purpose of Disbursement:  
 Parking Fee

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8766H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.41

16.59

21.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

318.39

1197.79

1516.18

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 525 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Amtrak

Mailing Address

900 2nd Street, NE,

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8769H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9.45

35.55

45.00

**B. Full Name (Last, First, Middle Initial)**  
 Charles Parking LLC

Mailing Address

200 East 27th Street

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement:  
 Parking Fee

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8761H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.62

17.38

22.00

**C. Full Name (Last, First, Middle Initial)**  
 Courtesy Cab Company

Mailing Address

1005 Thorn Street

City	State	Zip Code
Utica	NY	13502

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8764H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3.15

11.85

15.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 526 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Hyatt Regency Buffalo

Mailing Address

2 Fountain Plaza

City State Zip Code

Buffalo NY 14202

Purpose of Disbursement:  
LodgingCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8767H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

26.03

97.96

123.99

**B. Full Name (Last, First, Middle Initial)**

International House of Pancakes

Mailing Address

535 French Rd.

City State Zip Code

New Hartford NY 13413

Purpose of Disbursement:  
Meetings/MealsCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8765H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.51

32.02

40.53

**C. Full Name (Last, First, Middle Initial)**

Murbro Parking, Inc.

Mailing Address

618 Montgomery Street

City State Zip Code

Syracuse NY 13202

Purpose of Disbursement:  
Parking FeeCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8762H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.10

7.90

10.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 527 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Frank P. Nemeth

Mailing Address  
 21 High Dune Dr

City	State	Zip Code
Albany	NY	12203-5322

Purpose of Disbursement:  
 Mileage

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8760H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

185.59

698.18

883.77

**B. Full Name (Last, First, Middle Initial)**  
 NYC Taxi & Limousine Commission

Mailing Address  
 40 Rector Street

City	State	Zip Code
New York	NY	10006

Purpose of Disbursement:  
 Travel

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8770H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.36

5.14

6.50

**C. Full Name (Last, First, Middle Initial)**  
 NYC Taxi & Limousine Commission

Mailing Address  
 40 Rector Street

City	State	Zip Code
New York	NY	10006

Purpose of Disbursement:  
 Travel

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8757H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.21

4.59

5.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 528 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 NYC Taxi & Limousine Commission

Mailing Address  
 40 Rector Street

City State Zip Code  
 New York NY 10006

Purpose of Disbursement:  
 Travel

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8768H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.39

9.01

11.40

**B. Full Name (Last, First, Middle Initial)**  
 Sheraton Hotel and Towers

Mailing Address  
 811 Seventh Avenue

City State Zip Code  
 New York NY 10019

Purpose of Disbursement:  
 Office Expense

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8771H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.05

3.95

5.00

**C. Full Name (Last, First, Middle Initial)**  
 Sheraton Long Island

Mailing Address  
 110 Vanderbilt Motor Parkway

City State Zip Code  
 Smithtown NY 11786

Purpose of Disbursement:  
 Lodging

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8758H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

28.94

108.88

137.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 529 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 South Plaza Garage LLC

Mailing Address

330 East 26th Street

City	State	Zip Code
New York	NY	10010

Purpose of Disbursement:  
 Parking Fee

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8759H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.20

15.80

20.00

**B. Full Name (Last, First, Middle Initial)**  
 The Marx

Mailing Address

701 East Genesee Street

City	State	Zip Code
Syracuse	NY	13210

Purpose of Disbursement:  
 Lodging

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8763H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

35.35

133.02

168.37

**C. Full Name (Last, First, Middle Initial)**  
 Marthe Ngwashi

Mailing Address

224 Genesee Park Drive

City	State	Zip Code
Syracuse	NY	13224

Purpose of Disbursement:  
 Expense Reimbursement-see below

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8772H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

161.66

608.18

769.84

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

161.66

608.18

769.84

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 530 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 BJ's Wholesale Club

Mailing Address  
 2 Chevy Drive

City State Zip Code  
 East Syracuse NY 13057

Purpose of Disbursement:  
 Gas

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8779H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.08

30.42

38.50

**B. Full Name (Last, First, Middle Initial)**  
 BJ's Wholesale Club

Mailing Address  
 2 Chevy Drive

City State Zip Code  
 East Syracuse NY 13057

Purpose of Disbursement:  
 Gas

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8778H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.19

30.81

39.00

**C. Full Name (Last, First, Middle Initial)**  
 BJ's Wholesale Club

Mailing Address  
 2 Chevy Drive

City State Zip Code  
 East Syracuse NY 13057

Purpose of Disbursement:  
 Gas

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8788H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.77

29.23

37.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 531 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 CITGO

Mailing Address

P.O. Box 4689

City

State

Zip Code

Houston

TX

77210-4689

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8774H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.26

4.74

6.00

**B. Full Name (Last, First, Middle Initial)**  
 Dell Marketing L.P.

Mailing Address

One Dell Way, RR8

City

State

Zip Code

Round Rock

TX

78682

Purpose of Disbursement:

Office Supplies

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8789H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.03

71.63

90.66

**C. Full Name (Last, First, Middle Initial)**  
 Dinosaur BBQ

Mailing Address

246 W Willow Street

City

State

Zip Code

Syracuse

NY

13202

Purpose of Disbursement:

Meetings/Meals

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8781H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

12.47

46.93

59.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 532 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Kwik Fill/Red Apple

Mailing Address

65 Chestnut Street

City State Zip Code

Oneonta NY 13820

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8773H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.15

11.85

15.00

**B. Full Name (Last, First, Middle Initial)**

Lucky Moon Cafe

Mailing Address

719 E. Genesee Street

City State Zip Code

Syracuse NY 13210

Purpose of Disbursement:

Meetings/Meals

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D9280H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15.69

59.05

74.74

**C. Full Name (Last, First, Middle Initial)**

NYS Thruway Authority

Mailing Address

200 Southern Blvd. P.O. Box 189

City State Zip Code

Albany NY 12201-0189

Purpose of Disbursement:

Tolls

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8777H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

.50

1.90

2.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 533 / 585  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Sam's Club

Mailing Address

2649 Erie Blvd. East

City	State	Zip Code
Syracuse	NY	13224

 Purpose of Disbursement:  
Gas
Category/  
Type
 Activity or Event Identifier:  
Administrative  
[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8776H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.87		29.63		37.50

**B. Full Name (Last, First, Middle Initial)**

Staples

Mailing Address

3 Chevy Drive

City	State	Zip Code
East Syracuse	NY	13057

 Purpose of Disbursement:  
Office Supplies
Category/  
Type
 Activity or Event Identifier:  
Administrative  
[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8787H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.34		23.88		30.22

**C. Full Name (Last, First, Middle Initial)**

Staples

Mailing Address

3 Chevy Drive

City	State	Zip Code
East Syracuse	NY	13057

 Purpose of Disbursement:  
Office Supplies
Category/  
Type
 Activity or Event Identifier:  
Administrative  
[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8786H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.62		13.64		17.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 534 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Staples

Mailing Address  
 3 Chevy Drive

City State Zip Code  
 East Syracuse NY 13057

Purpose of Disbursement:  
 Office Supplies

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8780H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.79

25.59

32.38

**B. Full Name (Last, First, Middle Initial)**  
 T-Mobile

Mailing Address  
 P.O. Box 742596

City State Zip Code  
 Cincinnati OH 45274-2596

Purpose of Disbursement:  
 Cellphone Service

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8783H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9.78

36.81

46.59

**C. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address  
 P.O. Box 15062

City State Zip Code  
 Albany NY 12212-5062

Purpose of Disbursement:  
 Telephone

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8785H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

39.48

148.54

188.02

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 535 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address

P.O. Box 25506

City	State	Zip Code
Lehigh Valley	PA	18002-5506

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8784H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

11.58

43.59

55.17

**B. Full Name (Last, First, Middle Initial)**  
 Jessica Nowlin

Mailing Address

96 South Swan Street

City	State	Zip Code
Albany	NY	12210

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8790H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

140.73

529.46

670.19

**C. Full Name (Last, First, Middle Initial)**  
 Exxon Mobil

Mailing Address

1181 Western Avenue

City	State	Zip Code
Albany	NY	12203

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8807H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.64

17.46

22.10

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

140.73

529.46

670.19

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 536 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Exxon Mobil

Mailing Address

1181 Western Avenue

City State Zip Code

Albany NY 12203

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8795H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

4.93

18.59

23.52

**B. Full Name (Last, First, Middle Initial)**

Getty

Mailing Address

54 Church Street

City State Zip Code

Saratoga Springs NY 12866

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8800H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.52

9.49

12.01

**C. Full Name (Last, First, Middle Initial)**

J G's Pizza

Mailing Address

195 Lark Street

City State Zip Code

Albany NY 12210

Purpose of Disbursement:

Meetings/Meals

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8806H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

8.71

32.79

41.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 537 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8810H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.34

23.86

30.20

**B. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8801H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.18

8.21

10.39

**C. Full Name (Last, First, Middle Initial)**  
 New York State Bridge Authority

Mailing Address

Mid Hudson Bridge Toll Plaza

City

State

Zip Code

Highland

NY

12528

Purpose of Disbursement:  
 Tolls

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8809H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

.21

.79

1.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 538 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

New York State Bridge Authority

## Mailing Address

Mid Hudson Bridge Toll Plaza

City State Zip Code

Highland NY 12528

Purpose of Disbursement:  
TollsCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8794H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

.21

.79

1.00

**B. Full Name (Last, First, Middle Initial)**

NYS Thruway Authority

## Mailing Address

200 Southern Blvd. P.O. Box 189

City State Zip Code

Albany NY 12201-0189

Purpose of Disbursement:  
TollsCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8792H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

.23

.87

1.10

**C. Full Name (Last, First, Middle Initial)**

NYS Thruway Authority

## Mailing Address

200 Southern Blvd. P.O. Box 189

City State Zip Code

Albany NY 12201-0189

Purpose of Disbursement:  
TollsCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8796H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

.42

1.58

2.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 539 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 NYS Thruway Authority

Mailing Address

200 Southern Blvd. P.O. Box 189

City	State	Zip Code
Albany	NY	12201-0189

Purpose of Disbursement:  
 Tolls

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8808H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

.46

1.74

2.20

**B. Full Name (Last, First, Middle Initial)**  
 OK Copy & Print

Mailing Address

90 State Street

City	State	Zip Code
Albany	NY	12207

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8797H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.81

6.81

8.62

**C. Full Name (Last, First, Middle Initial)**  
 Price Chopper

Mailing Address

Church St. &amp; Railroad Place

City	State	Zip Code
Saratoga Springs	NY	12866

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8803H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.68

21.38

27.06

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 540 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Price Chopper

Mailing Address

Church St. &amp; Railroad Place

City State Zip Code

Saratoga Springs NY 12866

Purpose of Disbursement:  
Office SuppliesCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8804H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.13

4.27

5.40

**B. Full Name (Last, First, Middle Initial)**

Stewart's Shop

Mailing Address

PO Box 435

City State Zip Code

Saratoga Springs NY 12866

Purpose of Disbursement:  
GasCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8793H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.87

22.12

27.99

**C. Full Name (Last, First, Middle Initial)**

Stewart's Shop

Mailing Address

PO Box 435

City State Zip Code

Saratoga Springs NY 12866

Purpose of Disbursement:  
GasCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8802H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.78

25.53

32.31

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 541 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Stewart's Shop

Mailing Address

PO Box 435

City State Zip Code

Saratoga Springs

NY

12866

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 1

D D

1 5

Y Y

2 0

0 6

Transaction ID: D8805H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.50

20.72

26.22

**B. Full Name (Last, First, Middle Initial)**

Verizon Wireless

Mailing Address

P.O. Box 15062

City State Zip Code

Albany

NY

12212-5062

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 1

D D

1 5

Y Y

2 0

0 6

Transaction ID: D8811H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

81.38

306.19

387.57

**C. Full Name (Last, First, Middle Initial)**

Washington County Fair

Mailing Address

392 Old Schuylerville Rd.

City State Zip Code

Greenwich

NY

12834

Purpose of Disbursement:

County Fair Admission

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 1

D D

1 5

Y Y

2 0

0 6

Transaction ID: D8791H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.68

6.32

8.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 542 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Tom Carpenter

Mailing Address  
 12 Sunset Drive

City State Zip Code  
 Fredonia NY 14063-1629

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8812H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
447.45		1683.31		2130.76

**B. Full Name (Last, First, Middle Initial)**  
 CITGO

Mailing Address  
 P.O. Box 4689

City State Zip Code  
 Houston TX 77210-4689

Purpose of Disbursement:  
 Gas

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8820H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.77		29.23		37.00

**C. Full Name (Last, First, Middle Initial)**  
 FedEx Kinko's

Mailing Address  
 3125 Erie Blvd. East

City State Zip Code  
 Dewitt NY 13214-1201

Purpose of Disbursement:  
 Congressional Maps

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
 1 1 / 1 5 / 2 0 0 6

Transaction ID: D8822H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.10		19.20		24.30

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
447.45		1683.31		2130.76

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 543 / 585  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Hess Corporation

Mailing Address

1185 Avenue of the Americas

City State Zip Code

New York NY 10036

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 1

D D

1 5

Y Y

2 0

Y Y

0 6

Transaction ID: D8825H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.40

31.60

40.00

**B. Full Name (Last, First, Middle Initial)**

Hess Corporation

Mailing Address

1185 Avenue of the Americas

City State Zip Code

New York NY 10036

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 1

D D

1 5

Y Y

2 0

Y Y

0 6

Transaction ID: D8824H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.25

19.75

25.00

**C. Full Name (Last, First, Middle Initial)**

Holiday Inn Carrier Circle

Mailing Address

6555 Old Collamer Rd.

City State Zip Code

East Syracuse NY 13057

Purpose of Disbursement:

Lodging

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 1

D D

1 5

Y Y

2 0

Y Y

0 6

Transaction ID: D8818H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

178.38

671.06

849.44

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 544 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Holiday Inn Carrier Circle

Mailing Address

6555 Old Collamer Rd.

City	State	Zip Code
East Syracuse	NY	13057

Purpose of Disbursement:  
Lodging

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8821H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

30.84

116.05

146.89

**B. Full Name (Last, First, Middle Initial)**  
Holiday Inn Syracuse

Mailing Address

441 Electronics Parkway

City	State	Zip Code
Liverpool	NY	13088

Purpose of Disbursement:  
Lodging

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8827H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

144.25

542.70

686.95

**C. Full Name (Last, First, Middle Initial)**  
Mobil

Mailing Address

5959 Las Colinas Blvd.

City	State	Zip Code
Irving	TX	75039-2298

Purpose of Disbursement:  
Gas

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8815H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.25

19.75

25.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 545 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Mobil

Mailing Address

5959 Las Colinas Blvd.

City

State

Zip Code

Irving

TX

75039-2298

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8817H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.30

23.70

30.00

**B. Full Name (Last, First, Middle Initial)**  
 NYS Thruway Authority

Mailing Address

200 Southern Blvd. P.O. Box 189

City

State

Zip Code

Albany

NY

12201-0189

Purpose of Disbursement:

Tolls

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8813H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.48

5.57

7.05

**C. Full Name (Last, First, Middle Initial)**  
 NYS Thruway Authority

Mailing Address

200 Southern Blvd. P.O. Box 189

City

State

Zip Code

Albany

NY

12201-0189

Purpose of Disbursement:

Tolls

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8816H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.47

5.53

7.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 546 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 NYS Thruway Authority

Mailing Address

200 Southern Blvd. P.O. Box 189

City	State	Zip Code
Albany	NY	12201-0189

Purpose of Disbursement:  
 Tolls

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8819H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.48

5.57

7.05

**B. Full Name (Last, First, Middle Initial)**  
 NYS Thruway Authority

Mailing Address

200 Southern Blvd. P.O. Box 189

City	State	Zip Code
Albany	NY	12201-0189

Purpose of Disbursement:  
 Tolls

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8826H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.11

4.19

5.30

**C. Full Name (Last, First, Middle Initial)**  
 Staples

Mailing Address

3 Chevy Drive

City	State	Zip Code
East Syracuse	NY	13057

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8823H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.34

16.37

20.71

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 547 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Sunoco

Mailing Address

1735 Market Street, Ste LL

City	State	Zip Code
Mid City West	PA	19103-3758

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8814H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.40

31.60

40.00

**B. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address

P.O. Box 15062

City	State	Zip Code
Albany	NY	12212-5062

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8828H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

37.60

141.47

179.07

**C. Full Name (Last, First, Middle Initial)**  
 American Express Executive Business Ca

Mailing Address

P.O. Box 2855

City	State	Zip Code
New York	NY	10116-2855

Purpose of Disbursement:  
 Credit Card Payment-see below

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8829H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1919.32

7220.34

9139.66

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1919.32

7220.34

9139.66

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 548 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 7 Stars Restaurant

Mailing Address

945 E. Main Street

City	State	Zip Code
Shrub Oak	NY	10588

Purpose of Disbursement:  
 Meetings/Meals

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8833H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.16		26.98		34.14

**B. Full Name (Last, First, Middle Initial)**  
 Amazon.com

Mailing Address

1200 12th Ave S., Ste 1200,

City	State	Zip Code
Seattle	WA	98144

Purpose of Disbursement:  
 Office Supplies

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8879H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.72		10.25		12.97

**C. Full Name (Last, First, Middle Initial)**  
 American Airlines

Mailing Address

P.O. Box 619616

City	State	Zip Code
Dallas	TX	75261

Purpose of Disbursement:  
 Travel

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8876H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
71.61		269.39		341.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 549 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Amtrak

Mailing Address

900 2nd Street, NE,

City

State

Zip Code

Washington

DC

20002

Purpose of Disbursement:

Travel

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8855H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.45

35.55

45.00

**B. Full Name (Last, First, Middle Initial)**

Amtrak

Mailing Address

900 2nd Street, NE,

City

State

Zip Code

Washington

DC

20002

Purpose of Disbursement:

Travel

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8859H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.45

35.55

45.00

**C. Full Name (Last, First, Middle Initial)**

Amtrak

Mailing Address

900 2nd Street, NE,

City

State

Zip Code

Washington

DC

20002

Purpose of Disbursement:

Travel

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8866H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.45

35.55

45.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 550 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Amtrak

Mailing Address

900 2nd Street, NE,

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8867H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.14

26.86

34.00

**B. Full Name (Last, First, Middle Initial)**  
 Amtrak

Mailing Address

900 2nd Street, NE,

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8871H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.45

35.55

45.00

**C. Full Name (Last, First, Middle Initial)**  
 Amtrak

Mailing Address

900 2nd Street, NE,

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8883H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.13

41.87

53.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 551 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Amtrak

Mailing Address

900 2nd Street, NE,

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8880H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17.64

66.36

84.00

**B. Full Name (Last, First, Middle Initial)**  
 Amtrak

Mailing Address

900 2nd Street, NE,

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8881H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.08

37.92

48.00

**C. Full Name (Last, First, Middle Initial)**  
 Amtrak

Mailing Address

900 2nd Street, NE,

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8873H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

15.12

56.88

72.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 552 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Anthony's Restaurant & Cater

Mailing Address

4 W State Street

City	State	Zip Code
Binghamton	NY	13901

Purpose of Disbursement:  
 Meetings/Meals

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8831H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.99		30.06		38.05

**B. Full Name (Last, First, Middle Initial)**  
 Bella Napoli

Mailing Address

130 Madison Avenue

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement:  
 Meetings/Meals

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8848H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.83		21.97		27.80

**C. Full Name (Last, First, Middle Initial)**  
 Bella Napoli

Mailing Address

130 Madison Avenue

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement:  
 Meetings/Meals

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8847H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.34		76.56		96.90

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 553 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Bennigan's Grill

## Mailing Address

120 Main Street East

City State Zip Code

Rochester NY 14604

Purpose of Disbursement:  
Meetings/MealsCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8844H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.45

9.26

11.71

**B. Full Name (Last, First, Middle Initial)**

Best Western Fairgrounds

## Mailing Address

670 State Fair Blvd.

City State Zip Code

Syracuse NY 13209

Purpose of Disbursement:  
LodgingCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8850H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

45.09

169.65

214.74

**C. Full Name (Last, First, Middle Initial)**

Cafe 28

## Mailing Address

245 Fifth Avenue

City State Zip Code

New York NY 10016

Purpose of Disbursement:  
Meetings/MealsCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8851H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.98

41.32

52.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 554 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 CITGO

Mailing Address

P.O. Box 4689

City

State

Zip Code

Houston

TX

77210-4689

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8840H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.12

23.07

29.19

**B. Full Name (Last, First, Middle Initial)**  
 Clarion Hotel Riverside

Mailing Address

120 Main Street East

City

State

Zip Code

Rochester

NY

14604

Purpose of Disbursement:

Lodging

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8878H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

124.38

467.94

592.32

**C. Full Name (Last, First, Middle Initial)**  
 Crowne Plaza Hotel

Mailing Address

State And Lodge Street

City

State

Zip Code

Albany

NY

12207

Purpose of Disbursement:

Meetings/Meals

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8865H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.62

24.95

31.57

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 555 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Crowne Plaza Hotel

Mailing Address

State And Lodge Street

City	State	Zip Code
Albany	NY	12207

Purpose of Disbursement:  
 Meetings/Meals

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8837H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.92

29.80

37.72

**B. Full Name (Last, First, Middle Initial)**  
 Dell Service Sales

Mailing Address

P.O. Box 24424

City	State	Zip Code
Oakland	CA	94623-9852

Purpose of Disbursement:  
 Technical Support Renewal Refund

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8846H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

-44.16

-166.09

-210.25

**C. Full Name (Last, First, Middle Initial)**  
 Exxon Mobil

Mailing Address

1181 Western Avenue

City	State	Zip Code
Albany	NY	12203

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8841H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.06

15.32

19.38

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 556 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Exxon Mobil

Mailing Address

1181 Western Avenue

City	State	Zip Code
Albany	NY	12203

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8842H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.89		29.71		37.60

**B. Full Name (Last, First, Middle Initial)**  
 Exxon Mobil

Mailing Address

1181 Western Avenue

City	State	Zip Code
Albany	NY	12203

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8830H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.87		52.19		66.06

**C. Full Name (Last, First, Middle Initial)**  
 Exxon Mobil

Mailing Address

1181 Western Avenue

City	State	Zip Code
Albany	NY	12203

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8834H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.49		16.93		21.42

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 557 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Exxon Mobil

Mailing Address

1181 Western Avenue

City State Zip Code

Albany NY 12203

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8835H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.28	19.87	25.15
------	-------	-------

**B. Full Name (Last, First, Middle Initial)**

Hess Corporation

Mailing Address

1185 Avenue of the Americas

City State Zip Code

New York NY 10036

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8839H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.84	21.99	27.83
------	-------	-------

**C. Full Name (Last, First, Middle Initial)**

Hess Corporation

Mailing Address

1185 Avenue of the Americas

City State Zip Code

New York NY 10036

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8843H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.26	19.80	25.06
------	-------	-------

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 558 / 585  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Holiday Inn Binghamton - Arena

Mailing Address

2-8 Hawley Street

City	State	Zip Code
Binghamton	NY	13901

Purpose of Disbursement:  
Lodging

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8863H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.69		119.26		150.95

**B. Full Name (Last, First, Middle Initial)**  
Holiday Inn Syracuse

Mailing Address

441 Electronics Parkway

City	State	Zip Code
Liverpool	NY	13088

Purpose of Disbursement:  
Lodging

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8857H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.20		301.74		381.94

**C. Full Name (Last, First, Middle Initial)**  
Holiday Inn Syracuse

Mailing Address

441 Electronics Parkway

City	State	Zip Code
Liverpool	NY	13088

Purpose of Disbursement:  
Lodging

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8853H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.33		147.97		187.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 559 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Intermedia.net

Mailing Address

150 Mathilda Place, Suite 104

City	State	Zip Code
Sunnyvale	CA	94086

Purpose of Disbursement:  
 Computer Server Hosting

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8854H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

124.71

469.19

593.90

**B. Full Name (Last, First, Middle Initial)**  
 Intermedia.net

Mailing Address

150 Mathilda Place, Suite 104

City	State	Zip Code
Sunnyvale	CA	94086

Purpose of Disbursement:  
 Computer Server Hosting

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8858H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.88

7.11

8.99

**C. Full Name (Last, First, Middle Initial)**  
 Intermedia.net

Mailing Address

150 Mathilda Place, Suite 104

City	State	Zip Code
Sunnyvale	CA	94086

Purpose of Disbursement:  
 Computer Server Hosting

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8877H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.68

6.32

8.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 560 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Jack's Oyster House

Mailing Address

42-44 State Street

City State Zip Code

Albany NY 12207

Purpose of Disbursement:  
Meetings/MealsCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8838H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13.76

51.81

65.57

**B. Full Name (Last, First, Middle Initial)**

Jake Hafner's Restaurant and Tavern

Mailing Address

5224 West Taft Rd.

City State Zip Code

North Syracuse NY 13212

Purpose of Disbursement:  
Meetings/MealsCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8849H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

27.48

103.38

130.86

**C. Full Name (Last, First, Middle Initial)**

Jetblue Airways

Mailing Address

P.O. Box 17435

City State Zip Code

Salt Lake City UT 84117-7435

Purpose of Disbursement:  
TravelCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D8836H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

50.63

190.51

241.14

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 561 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Jetblue Airways

Mailing Address

P.O. Box 17435

City

State

Zip Code

Salt Lake City

UT

84117-7435

Purpose of Disbursement:

Travel

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y

1 1 / 1 5 / 2 0 0 6

Transaction ID: D8856H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

30.41

114.41

144.82

**B. Full Name (Last, First, Middle Initial)**

McCormick &amp; Schmick's

Mailing Address

1285 Avenue of the Americas

City

State

Zip Code

New York

NY

10019

Purpose of Disbursement:

Meetings/Meals

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y

1 1 / 1 5 / 2 0 0 6

Transaction ID: D8872H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

37.10

139.61

176.71

**C. Full Name (Last, First, Middle Initial)**

Metro Diner

Mailing Address

2641 Broadway

City

State

Zip Code

New York

NY

10025

Purpose of Disbursement:

Meetings/Meals

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y

1 1 / 1 5 / 2 0 0 6

Transaction ID: D8832H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6.09

22.91

29.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 562 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Morey's Family Restaurant

Mailing Address

5536 State Highway 7

City State Zip Code

Oneonta NY 13820

Purpose of Disbursement:  
Meetings/MealsCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8864H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.91

14.72

18.63

**B. Full Name (Last, First, Middle Initial)**

Net Stop / KioskLogix

Mailing Address

2755 E. Oakland Park Blvd., Suite

City State Zip Code

Fort Lauderdale FL 33306

Purpose of Disbursement:  
Internet AccessCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D9281H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.80

25.59

32.39

**C. Full Name (Last, First, Middle Initial)**

PC Connection

Mailing Address

730 Milford Rd.

City State Zip Code

Merrimack NH 03054-4631

Purpose of Disbursement:  
Computer SuppliesCategory/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

Transaction ID: D8861H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14.78

55.61

70.39

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 563 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 PC Connection

Mailing Address  
 730 Milford Rd.

City	State	Zip Code
Merrimack	NH	03054-4631

Purpose of Disbursement:  
 Computer Supplies

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8852H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.32		456.43		577.75

**B. Full Name (Last, First, Middle Initial)**  
 POSGuys.com

Mailing Address  
 MGM Solutions Inc. 2125 Humboldt Street

City	State	Zip Code
Bellingham	WA	98225

Purpose of Disbursement:  
 Office Equipment

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8868H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.80		221.20		280.00

**C. Full Name (Last, First, Middle Initial)**  
 Radisson Lexington Hotel New York

Mailing Address  
 511 Lexington Avenue

City	State	Zip Code
New York	NY	10017

Purpose of Disbursement:  
 Lodging

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8862H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.97		248.18		314.15

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 564 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Radisson Lexington Hotel New York

Mailing Address

511 Lexington Avenue

City	State	Zip Code
New York	NY	10017

Purpose of Disbursement:  
 Lodging

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8882H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

65.97

248.18

314.15

**B. Full Name (Last, First, Middle Initial)**  
 Sheraton Hotel and Towers

Mailing Address

811 Seventh Avenue

City	State	Zip Code
New York	NY	10019

Purpose of Disbursement:  
 Election Night Reception Cost

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8875H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

420.00

1580.00

2000.00

**C. Full Name (Last, First, Middle Initial)**  
 Sheraton Hotel and Towers

Mailing Address

811 Seventh Avenue

City	State	Zip Code
New York	NY	10019

Purpose of Disbursement:  
 Lodging

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8874H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.10

7.90

10.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 565 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Sheraton Hotel and Towers

Mailing Address

811 Seventh Avenue

City	State	Zip Code
New York	NY	10019

Purpose of Disbursement:  
 Lodging

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8870H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

83.82

315.36

399.18

**B. Full Name (Last, First, Middle Initial)**  
 Sprint PCS

Mailing Address

6200 Sprint Parkway

City	State	Zip Code
Overland Park	KS	66251

Purpose of Disbursement:  
 Telephone Equipment

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8869H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

162.73

612.18

774.91

**C. Full Name (Last, First, Middle Initial)**  
 Sunoco

Mailing Address

1735 Market Street, Ste LL

City	State	Zip Code
Mid City West	PA	19103-3758

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8845H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.61

32.41

41.02

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 566 / 585  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
The Marx

Mailing Address

701 East Genesee Street

City	State	Zip Code
Syracuse	NY	13210

Purpose of Disbursement:  
Lodging/Meetings/Meals

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8860H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

38.69

145.56

184.25

**B. Full Name (Last, First, Middle Initial)**  
Lisa DiBartolomeo

Mailing Address

305 West 50th Street, Apt. 6A

City	State	Zip Code
New York	NY	10019

Purpose of Disbursement:  
Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8884H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

73.82

277.72

351.54

**C. Full Name (Last, First, Middle Initial)**  
Cafe Metro

Mailing Address

14 East 42nd Street

City	State	Zip Code
New York	NY	10007

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8885H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

70.94

266.90

337.84

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

73.82

277.72

351.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 567 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 NYC Taxi & Limousine Commission

Mailing Address  
 40 Rector Street

City State Zip Code  
 New York NY 10006

Purpose of Disbursement:  
 Travel

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 15 / 2006

Transaction ID: D8886H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.87

10.83

13.70

**B. Full Name (Last, First, Middle Initial)**  
 Jennifer Schneider

Mailing Address  
 25 Shamrock Drive

City State Zip Code  
 Brookfield CT 06804

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 16 / 2006

Transaction ID: D8887H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

110.41

415.38

525.79

**C. Full Name (Last, First, Middle Initial)**  
 Beacon Natural Market

Mailing Address  
 348 Main Street

City State Zip Code  
 Beacon NY 12508

Purpose of Disbursement:  
 Meetings/Meals

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 11 / 16 / 2006

Transaction ID: D8892H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

.94

3.56

4.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

110.41

415.38

525.79

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 568 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Brookfield C Shell

Mailing Address

819 Federal Rd.

City State Zip Code

Brookfield CT 06804

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	6

Transaction ID: D8891H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

5.67

21.35

27.02

**B. Full Name (Last, First, Middle Initial)**

Brookfield C Shell

Mailing Address

819 Federal Rd.

City State Zip Code

Brookfield CT 06804

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	6

Transaction ID: D8904H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

4.20

15.80

20.00

**C. Full Name (Last, First, Middle Initial)**

Brookfield C Shell

Mailing Address

819 Federal Rd.

City State Zip Code

Brookfield CT 06804

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	6

Transaction ID: D8900H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6.72

25.28

32.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 569 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Brookfield C Shell

Mailing Address

819 Federal Rd.

City State Zip Code

Brookfield

CT

06804

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	6

Transaction ID: D8894H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.19

30.81

39.00

**B. Full Name (Last, First, Middle Initial)**

Brookfield C Shell

Mailing Address

819 Federal Rd.

City State Zip Code

Brookfield

CT

06804

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	6

Transaction ID: D8890H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.20

15.81

20.01

**C. Full Name (Last, First, Middle Initial)**

Delta Sonic

Mailing Address

3439 Erie Blvd.

City State Zip Code

Dewitt

NY

13214

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	6

Transaction ID: D8898H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15.33

57.68

73.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 570 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Exxon Mobil

Mailing Address

1181 Western Avenue

City	State	Zip Code
Albany	NY	12203

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8905H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.20

15.80

20.00

**B. Full Name (Last, First, Middle Initial)**  
 Metro-North Railroad

Mailing Address

347 Madison Avenue

City	State	Zip Code
New York	NY	10017

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8888H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17.85

67.15

85.00

**C. Full Name (Last, First, Middle Initial)**  
 Metro-North Railroad

Mailing Address

347 Madison Avenue

City	State	Zip Code
New York	NY	10017

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8893H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.56

20.94

26.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 571 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Metro-North Railroad

Mailing Address

347 Madison Avenue

City	State	Zip Code
New York	NY	10017

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8903H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.56

20.94

26.50

**B. Full Name (Last, First, Middle Initial)**  
 Metro-North Railroad

Mailing Address

347 Madison Avenue

City	State	Zip Code
New York	NY	10017

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8901H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.88

18.37

23.25

**C. Full Name (Last, First, Middle Initial)**  
 New York State Bridge Authority

Mailing Address

Mid Hudson Bridge Toll Plaza

City	State	Zip Code
Highland	NY	12528

Purpose of Disbursement:  
 Tolls

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8902H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

.21

.79

1.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 572 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Standard Parking

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

## Mailing Address

The MetLife Building 200 Park Avenue

City State Zip Code

New York NY 10166

Purpose of Disbursement:  
Parking FeeCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Date 11 / 16 / 2006

Transaction ID: D8889H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.52

9.48

12.00

**B. Full Name (Last, First, Middle Initial)**

Sunoco

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

## Mailing Address

1735 Market Street, Ste LL

City State Zip Code

Mid City West PA 19103-3758

Purpose of Disbursement:  
GasCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Date 11 / 16 / 2006

Transaction ID: D8896H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.50

39.50

50.00

**C. Full Name (Last, First, Middle Initial)**

Sunoco

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

## Mailing Address

1735 Market Street, Ste LL

City State Zip Code

Mid City West PA 19103-3758

Purpose of Disbursement:  
GasCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Date 11 / 16 / 2006

Transaction ID: D8899H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.40

31.60

40.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 573 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Superior Service Getty

Mailing Address

813 Federal Rd.

City	State	Zip Code
Brookfield	CT	06804

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8895H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.46

20.54

26.00

**B. Full Name (Last, First, Middle Initial)**  
 Jennifer Schneider

Mailing Address

25 Shamrock Drive

City	State	Zip Code
Brookfield	CT	06804

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8910H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

73.74

277.43

351.17

**C. Full Name (Last, First, Middle Initial)**  
 Brookfield C Shell

Mailing Address

819 Federal Rd.

City	State	Zip Code
Brookfield	CT	06804

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8914H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.30

23.70

30.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

73.74

277.43

351.17

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 574 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Brookfield C Shell

Mailing Address

819 Federal Rd.

City State Zip Code

Brookfield CT 06804

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	6

Transaction ID: D8911H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.58

24.80

31.38

**B. Full Name (Last, First, Middle Initial)**  
 Enterprise Rent-A-Car Company NY PAC

Mailing Address

600 Corporate Park Drive

City State Zip Code

Saint Louis MO 63105

Purpose of Disbursement:  
 Car Rental

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	6

Transaction ID: D8915H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

52.42

197.23

249.65

**C. Full Name (Last, First, Middle Initial)**  
 Garage Management Company

Mailing Address

122 W 3rd Street, # 1

City State Zip Code

New York NY 10012

Purpose of Disbursement:  
 Parking Fee

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	6

Transaction ID: D8912H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3.57

13.43

17.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 575 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Superior Service Getty

Mailing Address

813 Federal Rd.

City State Zip Code

Brookfield CT 06804

Purpose of Disbursement:  
 Gas

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	1

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D8913H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.85

18.29

23.14

**B. Full Name (Last, First, Middle Initial)**  
 Edgar R. Santana

Mailing Address

1438 Glover Street

City State Zip Code

Bronx NY 10462

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D9687H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

38.64

145.36

184.00

**C. Full Name (Last, First, Middle Initial)**  
 Let's Park Corp

Mailing Address

119 E 28th Street

City State Zip Code

New York NY 10016

Purpose of Disbursement:  
 Parking Fee

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M
1	0

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: D9688H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.25

19.75

25.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

38.64

145.36

184.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 576 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Let's Park Corp

## Mailing Address

119 E 28th Street

City State Zip Code

New York

NY

10016

Purpose of Disbursement:  
Parking FeeCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 0 6

Transaction ID: D9694H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.30

23.70

30.00

**B. Full Name (Last, First, Middle Initial)**

Let's Park Corp

## Mailing Address

119 E 28th Street

City State Zip Code

New York

NY

10016

Purpose of Disbursement:  
Parking FeeCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 0 6

Transaction ID: D9689H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.30

23.70

30.00

**C. Full Name (Last, First, Middle Initial)**

Let's Park Corp

## Mailing Address

119 E 28th Street

City State Zip Code

New York

NY

10016

Purpose of Disbursement:  
Parking FeeCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 0 6

Transaction ID: D9697H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.30

23.70

30.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 577 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**

Metropolitan Transit Authority

Mailing Address

330 Jay Street

City

State

Zip Code

Brooklyn

NY

10023

Purpose of Disbursement:

Tolls

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 0

D D

2 6

Y Y

2 0

0 6

Transaction ID: D9695H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1.89

7.11

9.00

**B. Full Name (Last, First, Middle Initial)**

Park Serv LLC

Mailing Address

140-166 West 53rd Street

City

State

Zip Code

New York

NY

10019

Purpose of Disbursement:

Parking Fee

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 0

D D

2 6

Y Y

2 0

0 6

Transaction ID: D9690H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.31

8.69

11.00

**C. Full Name (Last, First, Middle Initial)**

Sunoco

Mailing Address

1735 Market Street, Ste LL

City

State

Zip Code

Mid City West

PA

19103-3758

Purpose of Disbursement:

Gas

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date

M M

1 0

D D

2 6

Y Y

2 0

0 6

Transaction ID: D9696H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6.09

22.91

29.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 578 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Valet Parking Corp.

Mailing Address

422 W 15th Street

City

State

Zip Code

New York

NY

10011

Purpose of Disbursement:  
 Parking Fee

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	0	6

Transaction ID: D9868H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.20

15.80

20.00

**B. Full Name (Last, First, Middle Initial)**  
 Blake Zeff

Mailing Address

391 Sackett Street, #2

City

State

Zip Code

Brooklyn

NY

11231

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D9869H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.56

28.44

36.00

**C. Full Name (Last, First, Middle Initial)**  
 NYC Taxi & Limousine Commission

Mailing Address

40 Rector Street

City

State

Zip Code

New York

NY

10006

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882901.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

Transaction ID: D9870H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.56

28.44

36.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.56

28.44

36.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 579 / 585

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Caroline Griffin

Mailing Address

96 South Swan Street

City	State	Zip Code
Albany	NY	12210

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
 Unity 2006

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10430.67

Date 11 / 15 / 2006

Transaction ID: D9911H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

32.20

13.80

46.00

**B. Full Name (Last, First, Middle Initial)**  
 Amtrak

Mailing Address

900 2nd Street, NE,

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
 Travel

Category/  
Type

Activity or Event Identifier:  
 Unity 2006

**[MEMO ITEM]**

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10430.67

Date 11 / 15 / 2006

Transaction ID: D8730H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

23.80

10.20

34.00

**C. Full Name (Last, First, Middle Initial)**  
 Maiden Lane of Albany, Inc.

Mailing Address

111 Washington Avenue

City	State	Zip Code
Albany	NY	12210

Purpose of Disbursement:  
 Parking Fee

Category/  
Type

Activity or Event Identifier:  
 Unity 2006

**[MEMO ITEM]**

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10430.67

Date 11 / 15 / 2006

Transaction ID: D8733H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.40

3.60

12.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

32.20

13.80

46.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 580 / 585  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
 Edgar R. Santana

Mailing Address

1438 Glover Street

City	State	Zip Code
Bronx	NY	10462

Purpose of Disbursement:  
 Expense Reimbursements-see below

Category/  
Type

Activity or Event Identifier:  
 Unity 2006

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10430.67

Date 10 / 26 / 2006

Transaction ID: D9912H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.60		23.40		78.00

**B. Full Name (Last, First, Middle Initial)**  
 Let's Park Corp

Mailing Address

119 E 28th Street

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement:  
 Parking Fee

Category/  
Type

Activity or Event Identifier:  
 Unity 2006

**[MEMO ITEM]**

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10430.67

Date 10 / 26 / 2006

Transaction ID: D9693H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.50		7.50		25.00

**C. Full Name (Last, First, Middle Initial)**  
 Let's Park Corp

Mailing Address

119 E 28th Street

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement:  
 Parking Fee

Category/  
Type

Activity or Event Identifier:  
 Unity 2006

**[MEMO ITEM]**

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10430.67

Date 10 / 26 / 2006

Transaction ID: D9692H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.50		7.50		25.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.60		23.40		78.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 581 / 585  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Park Serv LLC

Mailing Address

140-166 West 53rd Street

City State Zip Code  
New York NY 10019

Purpose of Disbursement:  
Parking Fee

Category/  
Type

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10430.67

Activity or Event Identifier:  
Unity 2006

Date 10 / 26 / 2006

**[MEMO ITEM]**

Transaction ID: D9691H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.60		8.40		28.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
57528.91	209991.38	267520.29

**SCHEDULE L (FEC Form 3X)**

582 / 585

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: SchedL58

NAME OF COMMITTEE (In Full)  
New York State Democratic CommitteeNAME OF ACCOUNT  
Levin account

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	0.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	189.58	189.58
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	189.58	189.58
10. DISBURSEMENTS..... (From Line 6)	0.00	0.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)		189.58

Form/Schedule: **F3XA**

Transaction ID:

Please be advised that the wages reported on Schedule H4 were for employees who spent 25% or less of their time during the reporting period in connection with federal elections or on Federal Election Activity and, as such, these wages can be paid as administrative expenses. Fringe benefits may continue to be reported on Schedule H4.

Form/Schedule: **F3XA**

Transaction ID:

Please note the entries on Line 30 (b) with the purpose designated as 'GOTV Canvassing' represent canvassing done for Democratic statewide slate.

\*\*\*\*\*

Form/Schedule: **F3XA**

Transaction ID:

Please note the entries on Line 30 (b) with the purpose designated as 'Persuasion Canvassing' represent the Non-Federal portion of transactions that benefited both Federal and Non-Federal candidates. The Federal portion is reflected on Line 25.

Form/Schedule: **F3XA**

Transaction ID:

With respect to the 2006 Post-General Report, please note the following relative to Schedule A, Line 12: Transfers received from Dollars for Democrats during November 2006 reflect contributions received by Dollars for Democrats during the 2006 Pre-General reporting period and retained by Dollars for Democrats until transferred. This explains why there are no memo entries for the 2006 Post-General Report since the Committee discloses memo schedules on a quarterly basis based upon contributions received by Dollars for Democrats.

\*\*\*\*\*



Form/Schedule: **F3XA**

Transaction ID:

With respect to the Committee's 2006 Post-General Report, please note the following relative to Schedule A, Line 12: The \$12,341.34 transfer received from the Democratic National Committee Victory Fund during October, 2006 reflect contributions received by the Democratic National Committee during the 2006 August, September, and October Monthly reporting periods and retained by the Democratic National Committee until transferred. This explains why there are no memo entries for the 2006 Post-General Report since the Committee discloses memo entries on a quarterly basis based upon contributions received by the Democratic National Committee. The \$50,000.00, \$50,000.00 and \$140,000.00 transfers on Schedule A, Line 12 from the Democratic National Committee reflect party transfers.

Form/Schedule: **F3XA**

Transaction ID:

30 Day Post-General Report (10/19/06-11/27/06), ID #C00143230. This is in response to questions raised by the Federal Election Commission's notification dated 02/02/07, regarding information reported on the above referenced report: 1) Please note the Committee understands the requirements for exempt activities, including the use of volunteers for volunteer mail. The Committee used volunteers for the exempt mailing and complied with all other aspects of the exempt activities requirements; 2) Relative to Schedule B, Line 30(b), an amended report is being filed to provide additional information on the identity of the candidate including office sought and congressional district if applicable. Please be advised that the entries in question do meet the conditions of exempt activity; 3) Relative to Schedule H4, please note that the payment in question does not meet the definition of Federal Election Activity and the Committee did comply with all aspects of exempt party activity requirements; 4) Relative to Schedule A, Line 12 please note that no portion of the transfers in from the Democratic National Committee were used to fund exempt activities on behalf of any federal candidate.